Recurring Payment Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the Credit Card Information section below and sign the form.

All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

1	Customer Information (to be completed by merchant)		
	Customer/company		
	Contact name	Account number	
8	Email address	Phone ()	- Ext:
	Payment Information (to be completed by merchant)		
	I authorize Villa Del Monte HOA	to aut	tomatically bill the card listed below as specified:
u	Product/service description HOA Fees		
	Recurring amount\$60.00	<u>—</u>	
	Frequency Once Daily Weekly	Twice/month	X Monthly Quarterly
U	Start on//	nd on:	// Day Year
		No end da	ate
	Credit Card Information (to be completed by customer)		
U	Card type MasterCard VISA Discover	AMEX Othe	r
E	Cardholder name		Cardholder ZIP Code ————————————————————————————————————
	(as shown on card)		(iioiii ciedit card biiiiig address)
4	Card number		Expires/
S	Notify me via email when my credit card is charged. (Make sure email address above is correct.)		
3			
U	Customer's signature		Date