



## ONE TIME DEBIT AUTHORIZATION FORM - FOR CREDIT CARD ONLY -

I (we) hereby authorize Rams Village to initiate debit entries to my (our) account indicated below, and to debit or credit the same such account. If this item is returned unpaid, I authorize an additional returned item fee of the maximum amount allowed by the state to be charged to this account.

### Credit Card Account

<b>Card Type</b>	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover		
<b>Name on Card</b>			
<b>Credit Card Billing Address</b>			
<b>Credit Card Billing City, State, &amp; Zip Code</b>			
<b>Card Number</b>			
<b>Expiration Date</b>		<b>CVV</b>	

### Payment Setup Information

<b>Initial Amount</b>	\$ _____.	<b>Non-Discounted Difference</b>	<b>\$10.00</b>	<b>Total Amount To Run on Card</b>	\$ _____.
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### Authorization

This authorization is to remain in full force and effect for the number of payments authorized above or until Rams Village has received written notification from me (or us) of its termination, in such time and such manner as to afford Rams Village a reasonable opportunity to act on it.

Your transaction will be processed on the next business day or no more than 10 business days from the day Rams Village receives this signed form.

Once the payment has been processed you will receive an email providing verification of the payment and a receipt.

<b>Tenant Name</b>		<b>Tenant Unit &amp; Bedroom #</b>	____ - ____ - ____
<b>Payor Name</b>		<b>Payor Phone #</b>	
<b>Payor Driver's License ID#</b>		<b>State</b>	
<b>Payor Signature</b>			
<b>Email for Receipt</b>			
<b>Date</b>			

Remit Form Via: Email: [am@ramsvillage.com](mailto:am@ramsvillage.com) or Fax to (970) 498-0299