

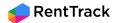
Auto Pay Authorization Form

Schedule your payment to be automatically deducted from your bank account, or charged to your Visa, MasterCard, or Discover Card. Just complete and sign this form to get started!

First Name:		Month to Start:
Last Name:		Day for Payment (1st-5th Only):
Street Address:		Property Name:
City, State, Zip:		Email:
I understand that if my total balance exceeds the still responsible for paying the full balance of like to re-instate the auto pay option. Pay a flat amount each month towards my be	he Maximum A due, and that I palance \$ or a flat amoun	nt that does not change and that I am responsible for updating my
Checking/ Savings Account -	- FREE!	Credit Card – 2.95%
☐ Checking ☐ Savings	- FREE!	Credit Card - 2.95% □ Visa □ MasterCard □ Discover
☐ Checking ☐ Savings Name on Acct	- FREE!	
☐ Checking ☐ Savings	- FREE!	□ Visa □ MasterCard □ Discover
☐ Checking ☐ Savings Name on Acct	- FREE!	□ Visa □ MasterCard □ Discover Cardholder Name
□ Checking □ Savings Name on Acct Bank Name	- FREE!	□ Visa □ MasterCard □ Discover Cardholder Name Account Number
□ Checking □ Savings Name on Acct Bank Name Routing #	- FREE!	□ Visa □ MasterCard □ Discover Cardholder Name Account Number Exp. Date CVV Code
□ Checking □ Savings Name on Acct Bank Name Routing # Account #	- FREE!	□ Visa □ MasterCard □ Discover Cardholder Name Account Number Exp. Date

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify my landlord in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form. I also agree to the RentTrack Terms of Service (Terms available at http://www.renttrack.com/terms-of-service/.

Processed by



Email completed form to help@renttrack.com