



Date: _____
Owner: _____
Unit: _____

I do hereby authorize the use of my credit card mentioned below, when my funds get below the minimum requirement balance as stated in my management agreement. I understand that I will be notified when my credit card account has been debited and my account has been credited to top of my working capital.

Type of Card:

Card Holder's Name:

Card Number:

Expiration Date:

Security Code:

Authorized Signature:

Utility Set-up only:

Emergency Repairs:

Working Capital:
