



Carillon Properties Credit/Debit Authorization Statement

I authorize Carillon Properties to charge each month to the credit card account specified below an amount equal to the monthly parking rent due under the Carillon Point Lease Agreement during the term of such lease. No other amounts will be charged on my credit card account unless Carillon Properties receives written authorization. This authorization may be cancelled, or a new credit card account substituted, by giving not less than thirty (30) days written notice from the Date of Charge set forth below. Carillon Properties is not responsible for any fees incurred as a result of an overdrawn account and I will pay any late fees accruing under the Lease in the event the charge is refused.

Name: _____

Billing Address: _____

Carillon Properties Acct. No.: _____

Type of Credit Card: _____

(Visa or Mastercard Only)

Credit Card Number: _____

VIN(Security No.): _____

(in signature block)

Expiration Date: _____

Total Monthly Charge: _____

(Monthly rent)

Date of Charge: Will be charged between the 1st and the 5th of every month

Signature: _____

Date: _____