

## **Payment Authorization Form**

**Note to tenant(s):** By filling out and signing this form, you are giving your permission to have a monthly recurring payment transferred from your bank account to your landlord/property manager.

Tenant Name:	
Property Address:	
Reason for Payment:	
CHOOSE ONE:	
EFT (Electronic Funds Transfer) - NO FEE	Joe Smith 1234 1234 Anystreet Court Anycity, AA 12345
Bank Routing #:	Pay to the order of
Account #:	Bank Anywhere Dollars
Checking: Savings:	, 123456789  ; 123456789123    • 1234
Credit Card – 2.99% Processing Fee	Bank Bank Check Number (Do not use) Routing Number Account Number
Card Number:	
Expiration Date: Security Code: (3-digit code)	
Billing Address:	
City: State: Zip Code:	
Account Holder Signature	
I hereby authorize Grandview Vacation Rentals to process this payment for the purpose stated above.	
Account Holder Name:	
Signature: Date:	·