

GOOD REALTY MANAGEMENT, LLC

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Email: leasing@thecambridgeapartments.com Website: www.thecambridgeapartments.com

NO CANCELLATION

Monthly RENT

Credit Card Authorization Form

Updated 1/28/2011

Date _____

I hereby authorize Good Realty Management, LLC (the Agent of the Owners) to *charge my credit card in the amount of _____ for Unit # _____ leased at 1560 Sherman Street, Denver, CO, 80203 from _____ (noon) to _____ (noon). Cardholder also agrees that damages incurred (absolutely NO SMOKING in building), over-holding occupancy or incidental charges shall be automatically charged to the card.

The charge is calculated as follows:

Rent Amount:	Cardholder Name:
Other:	Billing Address:
Total:	
	Phone Number:

Circle One: Visa/MC/AMEX Credit Card #:

Expiration Date:

CVV Code: ___ ___ ___ Or AMEX Code: ___ ___ ___

Cardholder Signature:

**In the event Cardholder disputes the charge to credit card for any reason, Cardholder agrees to pay the following administrative charges (if the Cardholder loses any amount through the dispute process or in Court): Building Manager \$50/hour and Property Manager \$100/hour.*