

## Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

<b>Credit Card Information</b>
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____
Cardholder ZIP Code (from credit card billing address): _____

I, \_\_\_\_\_, acknowledge that by signing this form I hereby authorize the Tarpon Bay Homeowners Association Inc. to charge my credit/debit card above for the payment of my HOA Assessment. Tarpon Bay Homeowners Association directly in lieu of being forwarded to collections. I understand that my information will be saved to file for future transactions on my account and that my card will be charged on a recurring basis until I contact the Association at [TarponBayHOA@feltrim.com](mailto:TarponBayHOA@feltrim.com) to cancel authorization.

\_\_\_\_\_

Customer Signature

\_\_\_\_\_

Date

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