

**CREDIT/DEBIT CARD AUTHORIZATION FOR HANGER RENTAL PAYMENTS**

I hereby authorize the City of Kingman hereinafter called CITY, to charge my ***CREDIT/DEBIT CARD*** named below, hereinafter called CARD, the amount of my monthly hanger rental bill with the CITY. I understand that these charges will normally occur on or about the 1st day of each month, or the first day thereafter should the 1st day of the month fall on a holiday or weekend. I also authorize the CITY to initiate credits and adjustments to my account for any errors that may occur in the handling of this authorization. I understand that I am responsible for verifying that the CARD debit was properly made and that it was for the correct amount.

This authorization shall remain in full force and effect until the CITY has received a signed, written notification from me that includes my account number to terminate the authorization to afford the CITY a reasonable opportunity to act upon the revocation.

Name:

Hanger Number: Phone Number:

Address:

CARD Information:

Name:

Billing Address:

City: State: Zip:

Card Number: Expiration Date:

Security Code:

*By signing this authorization, I verify that I am a legal owner of this account and understand how CARD debits will be handled to pay my monthly hanger rental bills.*

Signature Date

Printed Name