Credit Card Authorization

I authorize REMAX Town Center to charge my credit card for my Broker Monthly Fees and Reimbursable expenses and for payment of my account per Company Policy. This agreement will be in effect until I rescind it.

Card Number: _____

Card Type: Visa - MC - AMEX - DISCOVER Other____

Expiration: _____ CVS: _____

Name on Card: _____

MLS LAG# _____

Signature: _____ Date: _____

Cardholder's Address:

_____

(Where credit card statement is mailed)

Zip Code: _____ Phone: _____

☐ This form is updating my information

☐ This form contains new information

Please Discontinue my Recurring Credit Card Payment

Signature _____ Date: _____