

Check One:

- Regular Form of Payment
- Backup Form of Payment

CHARGE CREDIT OR DEBIT CARD

**AUTHORIZATION AND CONSENT AGREEMENT
FLEUR-DE-LIS APARTMENTS**

As indicated on womenshousing.com and in the Additions to BYU Contract, every student must provide a Regular and Backup form of payment. Using the forms labeled **Withdrawal From Checking Account** and **Charge Credit or Debit Card**, designate your Regular and Backup Forms of Payment for rent, utilities, fees and other charges. One of the forms of payment must be a credit card.

I (we) hereby authorize and request Larson Real Estate Investments, LLC, d/b/a Fleur-de-Lis Apartments (“Fleur-de-Lis”) to initiate electronic debit/credit entries or effect a charge/deposit by any other commercially accepted practice to my (our) credit or debit card. I (we) authorize and request the card issuer to honor the debit/credit entries initiated by Fleur-de-Lis and charge/deposit the same against the card. This authority pertains to my (our) Fleur-de-Lis Apartment Student-Landlord Rental Agreement and the schedule of payments and fees described in that contract and the Additions thereto. This authority shall remain in force and effect until Fleur-de-Lis and the card issuer have received written notification from me (or any other cardholder) of its termination in such time as to afford Fleur-de-Lis and the card issuer a reasonable opportunity to act on it. If a transaction is scheduled to occur on a weekend or holiday, Fleur-de-Lis will initiate a debit/credit entry and charge/deposit the card on or after the next business day. If Fleur-de-Lis is unable to complete a transaction due to card expiration, card number change, over-limit balance or any other problem for which I am (we are) responsible, I (we) agree to pay all resulting card issuer charges and a \$30.00 processing fee.

I acknowledge my responsibility to notify Fleur-de-Lis Management, in writing, if there is any change in my card number, or in the type of card to be charged/debited.

FLEUR-DE-LIS APARTMENT NUMBER _____

STUDENT NAME _____

SIGNATURE _____

DATE _____

START DATE _____

_____	Visa	_____	Card No.
_____	MasterCard		
_____	American Express		

NAME PRINTED ON CARD _____

SIGNATURE OF CARDHOLDER _____

CARD EXPIRATION DATE _____

ZIP CODE OF BILLING ADDRESS _____