



the key to all your storage needs

MEMBER SELF STORAGE ASSOCIATION OF AUSTRALASIA,
AMBRAY (NSW) PTY LTD TRADING AS STORAGE CITY NSW ABN 37 112 187 345
CNR MERINEE RD & BOWEN CRESCENT
GOSFORD WEST NSW 2250
TELEPHONE 02 4324 5388
FACSIMILE 02 4322 6906
storagecitynsw@bigpond.com
www.storagecity.com.au

CREDIT CARD AUTHORISATION FORM

Storage Space # (s):

Agreement #:

Storer's Name:

Name on Card:

Card #:

Expiration Date:

CCV #: (Master card & Visa only)

("Card check value" number is the 3 digit number printed in the signature panel of MasterCard and Visa cards immediately following the 16 digit cardholder number. This is an additional verification check asked for by MasterCard and Visa)

Type: Visa Mastercard Amex Diners Other (pls specify)

I hereby authorise Ambray (NSW) Pty Ltd trading as Storage City NSW (ABN 37 112 187 345) ("Storage City"(NSW)) to charge the above card account automatically each month and to apply that charge towards the payment of my monthly rent and any other amounts owing under the self storage agreement for the unit number stated above.

I understand that it shall remain my obligation to notify Storage City(NSW) in writing 14 days in advance of my intention to terminate my tenancy and to pay any amounts of rent that may become thereby due.

Date:

Signature:

Name:
(Please Print)