
Fletcher Custom Storage Recurring Credit Card Charge Authorization Form

I (we) hereby authorize Fletcher Custom Storage, Fletcher, NC, hereafter referred to as FCS, to make recurring charges to my Credit Card listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until FCS is notified by me (us) in writing to cancel it in such time as to afford FCS and Credit Card company a reasonable opportunity to act on it.

(Name PLEASE PRINT AS APPEARS ON CARD)

(Billing Address PLEASE PRINT)

(Shipping Address – if different)

(Phone Number PLEASE PRINT)

(Email PLEASE PRINT)

Please circle one: Visa / MasterCard / American Express / Discover / Other _____

Account Number: _____

Expiration Date: _____ Security Code: _____

Charge Amount: \$ _____

Frequency (please circle one or fill out your own schedule):

Bi-monthly Monthly Quarterly or _____

(Signature)

(Effective Date)

Please return to:

Fletcher Custom Storage

P.O. Box 582

Weaverville, NC 28787

(828) 658-9795