

Licensee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Proximity Fob or Building Access Card #: \_\_\_\_\_

**CREDIT CARD AUTHORIZATION**

I hereby authorize Brookfield Properties Ltd. and Standard Parking of Canada Ltd. to automatically charge my credit card, currently \$\_\_\_\_\_, once per calendar month, on or before the 5<sup>th</sup> business day of the month, for all amounts due under the above parking agreement. I understand that the amount of my monthly parking charge may increase or decrease from time to time because of changes in applicable parking rates (to which I agree). I understand that by having my parking charges processed via this agreement, all applicable parking charges due will automatically be charged to my credit account and I will not receive a monthly invoice. These procedures will remain in place unless and until I terminate the parking agreement in accordance with its terms. I further authorize a \$20.00 charge to my credit card account in any case in which the automatic charge is rejected.

I agree to give the Licensor prompt written notice of any change in my credit card account number and understand that the Licensor must receive such notice by the 15<sup>th</sup> of the month in order for it to be effective as part of the next month's billing cycle.

Credit Card Type: VISA  Mastercard  American Express 

Credit Card #: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ Security Code: \_\_\_\_\_  
3-4 digit code on front or back of card**AUTOMATIC DEBIT AUTHORIZATION**

I hereby authorize Brookfield Properties Ltd. and Standard Parking of Canada Ltd to automatically charge my bank account, currently \$\_\_\_\_\_, once per calendar month, on or before the 5<sup>th</sup> business day of the month, for all amounts due under the above parking agreement. I understand that the amount of my monthly parking charge may increase or decrease from time to time because of changes in applicable parking rates (to which I agree). I understand that by having my parking charges processed via the this agreement, all applicable parking charges due will automatically be charged to my bank account and I will not receive a monthly invoice. These procedures will remain in place unless and until I terminate the parking agreement in accordance with its terms. I further authorize a \$20.00 charge to my bank account in any case in which the automatic charge is rejected.

I have attached either a voided cheque (if a chequing account) or a deposit ticket (if a savings account) from the account to which this charge will be posted. I agree to give the Licensor prompt written notice of any change in my bank or bank account number (accompanied by a voided cheque or deposit ticket from the new account), and understand that the Licensor must receive such notice by the 15<sup>th</sup> of the month in order for it to be effective as part of the next month's billing cycle.

Complete below or include a void cheque or deposit ticket.

Bank Name: \_\_\_\_\_

Account Type: Checking  Savings 

Account #: \_\_\_\_\_

Transit #: \_\_\_\_\_ Branch #: \_\_\_\_\_

Signature of Joint Account Holder: \_\_\_\_\_