

## Resident ("Lessee") AutoPay Agreement ("Agreement")

1. Complete, sign and date this Agreement and keep a copy for your records.
2. If you will be using direct debit, please attach to this Agreement a voided check from your designated checking account ("Account"), which Account will be debited monthly for lease payments in the amount stated in the lease agreement between you and your property manager/lessor ("Lessor").
3. Send this Agreement, along with the attached voided check, to your Property Management Company for processing.
4. It takes 72 business hours for transactions to process. Business days are Monday-Friday excluding banking holidays
5. You may cancel a transaction or all future transactions at any time up to 24 business hours prior to debit by notifying your Lessor or PayLease. Notification includes via phone to PayLease or your property manager, e-mail to [support@paylease.com](mailto:support@paylease.com), or fax to PayLease. Voice messages will not be accepted.
6. If you submit an e-mail address below, you will receive an e-mail notification prior to your debit day notifying you of your debit day and debit amount.

### Fee:

- \*E-Check: \$2.20
- \*MasterCard/Discover: 3% of total Transaction
- \*American Express: 4% of total Transaction

### AutoPay Schedule:

Transaction Amount \$ \_\_\_\_\_  
 Debit Day of the Month \_\_\_ \_\_  
 Initial Debit (Month/Year) \_\_\_ \_\_/20\_\_\_ \_\_  
 Final Debit (Month/Year) \_\_\_ \_\_/20\_\_\_ \_\_ or check for no end date \_\_\_

### Property Information (Property that payment is being applied to):

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|  |      |       |     |
|--|------|-------|-----|
| Address (include unit number if applies) | City | State | Zip |
|--|------|-------|-----|

### Payment Information:

**(Please fill out EITHER Credit Card Information on Page 1 or E-Check information on Page 2)**

Credit Card Information (MasterCard/Discover/American Express):

Card Number: \_\_\_\_\_

Card Expiration Date:   /20        CWV2 Number \_\_\_\_\_  
 (Last three digits on the back of Credit Card)

First Name: \_\_\_\_\_      Last Name: \_\_\_\_\_

Address: \_\_\_\_\_      City: \_\_\_\_\_

State: \_\_\_\_\_      ZIP/Postal Code: \_\_\_\_\_

