



Recurring Payment Authorization Form

Schedule your payment to be automatically deducted from your bank account, or charged to your Visa, MasterCard. Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your checking/savings account (no charge) or credit card (+ 3.50% fee). You will be charged the amount indicated below each billing period. The charge will appear on your bank statement as "IN *CRIS & FRIENDS SERVIC". You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 2 days prior to the payment being collected.


Please complete the information below:

I _____ authorize **Cris & Friends Services, LLC** to charge my monthly
(full name)

- payment previously set on:
- Monthly: on the date of cleaning.
 - Bi-weekly: Between the 2 cleanings.
 - Weekly: Every 2 cleanings.

Billing Address _____ Phone# _____
 City, State, Zip _____ Email _____

Checking/ Savings Account

<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Name on Acct _____	
Bank Name _____	
Account Number _____	
Bank Routing # _____	
Bank City/State _____	
	
*Please send picture of VOID check.	

Credit Card

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
Cardholder Name _____	
Account Number _____	
Exp. Date _____	
CVV# _____	

SIGNATURE _____ DATE _____

Recurring Payment Authorization Terms

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Cris & Friends Services, LLC in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next 2 business days. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that **Cris & Friends Services, LLC** may at its discretion attempt to process the charge again within 5 days, and agree to an additional **\$35.00** charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card companies; so long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE _____

DATE _____