



TENANT'S CREDIT / DEBIT CARD AUTHORIZATION

I hereby authorize the Louisville Regional Airport Authority ("Company") to initiate charges on the date due as specified in my agreement with the Company to and, if necessary, initiate credit entries and adjustments to any charges in error to my credit /debit card account as indicated below.

This authority is to remain in full force and effect until Company has written notification from me of its termination in such time and manner as to afford the Company reasonable time to act on it.

[Empty rectangular box for signature or stamp]

Tenant: \_\_\_\_\_

Property Leased: \_\_\_\_\_

Person to Contact: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Card: VISA\_\_\_\_ MasterCard\_\_\_\_ AMEX\_\_\_\_ Discover\_\_\_\_ Diners\_\_\_\_

Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Return this form to: Louisville Regional Airport Authority  
Attn: Accounts Receivable  
700 Administration Drive  
Louisville, KY 40209-1537  
Main: (502) 368-6524  
Fax: (502) 367-0199

10/01/19