Telluride Mountain Village
Owners Association

AUTOMATIC CREDIT CARD BILLING REQUEST

Select One: ☐ **Quarterly Charge** ☐ **Annual Charge**

I (we) _____ hereby authorize Telluride Mountain Village Owners Association (TMVOA) to initiate a charge to my (our) credit card account. This authority will remain in effect until notified by me (us) in writing to cancel.

_____

CREDIT CARD NO, EXPIRATION DATE, CIV NO., (LAST 3 DIGITS ON BACK OF CARD FOR V/MC OR 4 DIGITS ON FRONT OF AMEX.)

_____

CUSTOMER SIGNATURE AND DATE

_____

NAME (PLEASE PRINT) – AS IT APPEARS ON CREDIT CARD

_____

OWNER BILLING ADDRESS – AS THE CREDIT CARD COMPANY HAS ON FILE

_____

TELEPHONE # (INCLUDING AREA CODE)

_____

MOUNTAIN VILLAGE PROPERTY ADDRESS

Please fill out form completely and FAX to:

TMVOA Email: accounting@tmvoa.org
TMVOA FAX: 970-369-7656

If you have any further questions or are in need of assistance, please contact

Whitney Pearce via Email: Whitney@tmvoa.org or Phone: 970-728-1904 x 5