



Steamboat Grand

Resort Hotel Condominium Association Inc.

CREDIT CARD AUTHORIZATION AGREEMENT

I hereby authorize my credit card, as specified below, to be charged for the quarterly dues for the unit(s) listed below. I understand that the same credit card will be charged each quarter until such time as I request in writing that it no longer be used. The agreed upon amount will be the quarterly dues billing amount shown on a statement mailed approximately one week prior to the charge being processed. If rental income is being applied to the account, the charge will be for the net amount due, if any. Credit card charges will be posted on or about the 20th of the first month of the fiscal quarter (January, April, July and October).

Declined credit card will incur a \$25 fee for additional processing costs.

Owner's Name: _____

Unit(s) and Fraction(s): _____

Card Number: _____

Expiration Date: _____ Card Type: _____

Signature of Cardholder: _____

Date: _____

Name on card (if different): _____

Your Address on Card Stmt: _____

Email Address for Charge Confirmation: _____

Check here if you would like to receive your quarterly statements by E-mail.

Association Accounting and Administrative Assistance LLC
2300 Mt. Werner Circle, Steamboat Springs, CO 80487