



RED CAR AUTO VAULT, LLC
 37606 N Tamiami Trail
 Sarasota, Fl. 34243
 941-302-7678



PRIVATE CAR STORAGE LICENSE AGREEMENT

 (First Name) (Last Name) (Cell Number)

 (Address) (City) (Zip Code)

 (Home Phone #) (Business #) (Email Address)

 (Driver's License Number) (State)

 (Insurance Company) (Policy#)

 (Insurance Agent) (Agent Phone#)

 (Make) (Model) (Year)

 (License Plate #) (VIN #) (Odometer Reading)

 (Credit Card #) (Exp. Date) (CVC)

 (Billing Address of Credit Card) (City)

I authorize Red Car Auto Vault to charges my credit card on a monthly basis for the storage of my vehicle. By signing this agreement, I hereby authorize Red Car Auto Vault to charge to my credit card all storage and related services including fees, costs, services and taxes to the clients account. Client understands and also agrees any past due amount will be added in its entiertyto the first charge payment and will not be divided into equal payments. This authorization will remain in effect until cancelled by the cardholder.

(Signature) _____ (Date) _____

This License Agreement dated _____ is made by and between Red Car Auto Vault, LLC("Licensor") and the Customer("Licensee")

RENT: \$ _____ + TAX PER INDIVIDUAL PARKING SPACE PAYABLE ON THE FIRST DAY OF EACH MONTH COMMENCING ON POSSESSION OF SAID SPACE.