



Credit Card Authorization Form

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA
Company Name / Account Name (If App.): _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____ CVV _____
Cardholder Billing Address: _____
City, Province, Postal Code: _____
Phone #: _____
Email: _____

I, _____, authorize Brent Quarries to charge my credit card noted above for goods and services provided.

OR

I, _____, authorize _____ to place orders with W.D. Brent Rentals Limited and take payment from the card noted above for the costs incurred.

I authorize W.D. Brent Rentals Limited to keep my information on file for future transactions.

CUSTOMER SIGNATURE

DATE

I understand that this authorization will remain in effect until I cancel it in writing. I agree to notify the business in writing of any changes to my information. I certify that I am an authorized user of this credit card and that I will not dispute the payments with my credit card company provided the transactions correspond with the terms indicated in this form.