

# Red Truck, Inc.

1917 San Anseline Ave Long Beach, CA 90815

Tel: (562)896-6070 Fax: (562)684-0420

## Credit Card Authorization Form

(illegible or incomplete applications will not be accepted)

I hereby authorize Red Truck, Inc. (RT) to charge the credit card listed below for payment of fees, costs, and expenses (including but not limited to rentals, purchases, labor, extended rentals, loss & damage, transportation and restocking), which are incurred by Cardholder/Company and/or agents of Cardholder/Company.

I certify I am authorized to sign this form. I understand that my signature on this contract agreement will serve as my authorization on the credit charge slip and as a signature on file for all authorized charges and outstanding balances now and in the future. I understand that in the event a charge against my account is denied, I will be notified immediately to make payment in cash, money order or certified check. I also understand that RT will apply a chargeback fee to my account of \$50 if I initialize a chargeback with my credit card issuer to reverse payment, without permission from RT, of any of the charges authorized on this form, and I agree to pay this fee if such incident occurs.

I understand that this agreement will remain in effect until specifically revoked in writing. It is the responsibility of the Cardholder/Company named herein to provide written notification to RT if a card has been cancelled or revoked, and file an updated Credit Card Authorization Form when modification of any of the above information is necessary, including modification of the expiration date when a credit card is renewed. I understand that cancellation of this authorization should be done via certified mail for my protection and that cancellation is effective upon receipt by RT.

Credit Card Type:     Visa             Mastercard             American Express

Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_

Credit Card Verification Number (3 DIGIT NO. ON BACK OF CARD/AMEX 4 DIGIT NO. ON FRONT): \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Company: \_\_\_\_\_

Credit Card Billing Address ( where you receive your credit card statements):

Street: \_\_\_\_\_ Apt#/Suite#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Your Name: \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_ Date: \_\_\_\_\_