



Credit Card Authorization Form

Company Name: _____

Cardholder Information

Name on Card: _____

Billing Address: _____

City, State, ZIP: _____

Phone Number: _____

Email Address: _____

Credit Card Details

Card Number: _____

Expiration Date (MM/YY): _____

CVV: _____

Authorization

I, the undersigned, authorize High Reach Equipment Services to charge the credit card listed above for the following:

Invoice Number(s): _____

Amount Authorized: \$ _____

This authorization is valid for the amount and purpose indicated above. I certify that I am an authorized user of this credit card and will not dispute the payment with my credit card company, provided the transaction corresponds to the terms indicated in this form.

Cardholder Signature: _____

Date: _____

Any unforeseen charges (i.e. fuel charge, damage to machine, or other) will be charged to your account. All credit card charges will have a 2% online convenience fee.