



## Credit Card Authorization Form

### Recurring Billing

I understand my credit card will be billed monthly in advance for services rendered and so authorize said billing as well as additional usage charges as they occur. I understand that charges declined by the credit card issuer will constitute grounds for cancellation of service and that all monthly charges and usage charges incurred will be subject to collection procedures. This authorization will continue until revoked in writing.

*Please complete all the following information. Your account cannot be processed if incomplete.*

**Check type of Credit**       MC       VISA       DISCOVER       AMEX

**Last Four of CC Number:** \_\_\_\_\_      **Exp. Date:** \_\_\_\_\_

**Name of Credit Card Holder:** \_\_\_\_\_

*(As appears on the card)*

**Address:** \_\_\_\_\_

*(As appears on the statement)*

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

**Contact Phone:** \_\_\_\_\_

**Product or Service: Monthly managed services, time and materials charges**

\_\_\_\_\_  
**Signature of Credit Card Holder**

\_\_\_\_\_  
**Date**

I certify that I am an authorized user of this credit card and that I will not dispute the payment with my card company; so long as the transaction corresponds to the terms indicated in this form. I also understand that monthly billing amounts will be different month-to-month based on equipment purchases, usage charges, or additional labor usage.

Questions? Please call 865-686-6677

Thanks for your business!