

Credit Card Authorization Form

98 Auto Recyclers 29119 Cortez Blvd., Brooksville, FL 34602 Phone: 352-796-2492 | 800-342-2060 | Fax: 352-754-8597 Once complete, fax this form to 352-754-8597



Credit Card Information

| Cardholder Name: | Phone: | | | |
|----------------------|-------------------|--|--|--|
| Billing Address: | | | | |
| City: | State: Zip: | | | |
| Card #: | Exp: CVV: | | | |
| Shipping Information | | | | |
| Business Name: | Phone: | | | |
| Street: | | | | |
| City: | State: Zip: | | | |
| Detail of Charges | | | | |
| Vehicle: | Part(s): | | | |
| Salesperson: | Total Charges \$: | | | |

Standard freight includes delivery to a **commercial business address** with access to a loading dock or fork lift. Any accessorial charges (lift gate service/residential delivery) requested by customer will be charged to the credit card above after the order is delivered.

As the credit card holder, by signing below, I understand that this order is being placed by telephone and my signature on this agreement is binding. I furthermore authorize the amount above to be charged to my credit card as well as authorization for the receipt of goods and services at the shipping address above. I also understand that I am responsible for all shipping charges to and from 98 Auto Recyclers in the event of a return for any reason after the order has shipped. I understand that if I am purchasing cosmetic items such as body parts (sheet metal or plastics), seats, trim, dash's, interior panels, etc., that digital photos will be available before shipping, and that these items will be shippied on an as-is- basis.

| Cardholder Signature: | Date: | |
|-----------------------|-------|--|
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