

Priority Towing Inc

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Credit Card Authorization Form

Card Type: _____

Card# _____ - _____ - _____

Expiration Date: ____/____ CVV Code: _____

Amount Authorized for this charge: \$ _____

Name as printed on card: _____

Billing Address for card listed above:

Address: _____ City _____ State: _____ Zipcode: _____

Return call phone#: _____ - _____ - _____ Ext. _____

One Time Use _____ Card on File _____

I agree to pay the above agreed total in full in accordance to card issuer agreement. This is a non refutable charge to the merchant and provider listed. I the cardholder agrees to the no refund policy as stated above.

Authorized signature of card holder:

X _____ Date: _____

****A copy of the card used and ID must be returned with the form.**