



BCCONDOS.NET

Credit Card Authorization

To	"	Fax or Email	"
From	"	Date	"

Please complete this form and return via email or fax to the attention of your sales rep.

Company	"		
Contact Name	"		
Email	"	Phone	"
Address	"	City	"
Province / State	"	Postal / Zip	"

CREDIT CARD INFORMATION

"

Type	Visa	"	MasterCard	"	American Express	"
Name on Card	"			CVC Code	"	
Card Number	"			Expiry Date	"	

I hereby authorize _____, to debit the above credit card for a maximum amount of \$ _____

I am the principal cardholder and the signature below matches the one on the above card.

Please provide a photocopy of credit card and driver's license (front & back).

"

Signature	"	Date	"
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