

**EASTWAY
LOCK & KEY, INC.**

3807 Monroe Rd. Charlotte NC 28205
(704)347-1088 Fax (704)347-0596

CREDIT CARD AUTHORIZATION FORM

I, _____, OF _____
HEREBY AUTHORIZE EASTWAY LOCK & KEY, INC., TO CHARGE MY CREDIT CARD ACCOUNT

IN THE AMOUNT NOT TO EXCEED: \$ _____

VISA MASTERCARD AMERICAN EXPRESS

CREDIT CARD NUMBER _____

EXPIRATION DATE: ____/____/____ VID CODE ON BACK OF CARD: _____

CREDIT CARD BILLING ADDRESS:

STREET: _____

CITY: _____ STATE: _____

ZIP CODE: _____ - _____ TELEPHONE: () _____ - _____ FAX () _____ - _____

REQUESTED SHIPPING ADDRESS:

STREET: _____

CITY: _____ STATE: _____

ZIP CODE: _____ - _____ TELEPHONE () _____ - _____ FAX () _____ - _____

AS THE CREDIT HOLDER, I HEREBY AUTHORIZE RECEIPT OF GOODS & SERVICES AT THE ADDRESS ABOVE OR THE ADDRESS ON YOUR QUOTE, OR INVOICE FOR THIS PURCHASE. I ALSO UNDERSTAND THAT ACCEPTANCE OF YOUR QUOTE, ORDER, OR INVOICE IS ACCEPTANCE OF ALL OF EASTWAY LOCK & KEY, INC. TERMS AND CONDITIONS. NO SPECIAL ORDERS, OR PRODUCTION AND FABRICATION SERVICES CAN BE CANCELLED OR REFUNDED ONCE THE ORDER/QUOTE HAS BEEN PLACED. I FULLY UNDERSTAND THAT MY CREDIT CARD WILL STILL BE CHARGED ONCE THE ORDER/QUOTE HAS BEEN PLACED FOR SPECIAL ORDERS, OR PRODUCTION AND FABRICATION SERVICES.

CARDHOLDER SIGNATURE (SEAL)

____/____/____
DATE

QUOTE, ORDER, OR INVOICE NUMBER: _____

DATE: _____