

Douglas Lake Equipment Ltd

Head Office/ Surrey Branch

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Kamloops Branch 706 Carrier Road Kamloops, BC V2H 1G2 Tel : (250) 851-2044 Fax : (250) 851-8571	Quesnel Branch 3650 Hwy 97 N Quesnel, BC V2J 5Z1 Tel : (250) 991-0406 Fax : (250) 991-0402	Grande Prairie Branch 14250 - 100th Street Grande Prairie, AB T8V 7C7 Tel : (780) 532-5344 Fax : (780) 532-2457	Dawson Creek Branch 11508 - 8th Street Dawson Creek, BC V1G 3R8 Tel : (250) 782-5281 Fax : (250) 782-7511
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CREDIT CARD AUTHORIZATION FORM

Purchaser Information				<input type="checkbox"/> X if same	Card Holder Information			
Name				Name				
Address				Address				
Contact				Signatory				
Phone		Fax		Phone		Fax		
Credit Card Information								
Card Type		<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> American Express	OTHER: <input type="text"/>			
Account / Card #				Expiry:		Security Code		
Payments to be made using the Credit Card Information supplied herein:								
One time Charge		Amount		Invoice / Work Order #				
Rental payments		Amount		<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	# of Days: <input type="text"/>		
To be kept on file for any future Parts and/or Service purchases. <i>Max per Transaction:</i> <input type="text"/>								
To be kept on file for payments, as requested , on my DLE Account# <input type="text"/>								
Notes:								

****A photocopy of Credit Card (Front & Back) and Cardholders Drivers Licence (Front & Back) is required to accompany this form.**

By signing below, I the Cardholder, or authorized signatory of such credit card, hereby authorize Douglas Lake Equipment Limited to charge the credit card using the information that I have provided on this Credit Card Authorization form. I agree that the information provided here is true and correct and that I am the authorized cardholder. Furthermore, I agree that I am the purchaser, or hereby authorize the purchaser as stated above, to use my credit card to make these purchases or payments. *I understand that payments may be subject to a 3% administration fee.

SIGNED: _____

DATE Signed: _____

BY: _____

Please PRINT name