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Credit Card Payment Authorization Form

Please sign and complete this form to authorize The FloorWorks to make charges to your credit card listed below. By signing this form, you give The FloorWorks permission to charge your credit card for deposits on accepted proposals and for balance due on invoices.

I, _____, hereby authorize The FloorWorks to charge my credit card
(print full name)

account indicated below for deposits and balances due on or after the invoice due date. Charges made are for payments for goods and services rendered and the required deposits for those services.

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Card Number _____

Expiration Date _____

CVV _____

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

I authorize The FloorWorks to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

As the credit card holder, I also authorize The FloorWorks to charge my credit card for future purchases verbally approved by me.

Authorization valid until: ____ / ____ Initials Here: _____

** Your completion of this authorization form helps us protect you, our valued customer, from credit card fraud.
The FloorWorks will keep all information entered on this form strictly confidential**