



**CREDIT CARD AUTHORIZATION**

COMPANY NAME: \_\_\_\_\_

CREDIT CARD NUMBER: \_\_\_\_\_

EXP DATE \_\_\_ / \_\_\_ AVS CODE 3 or 4# \_\_\_\_\_

BILLING ZIP CODE \_\_\_\_\_ STREET NUMBER \_\_\_\_\_

PRINTED NAME OF CARD HOLDER \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_ TRANSACTION LIMIT: \$ \_\_\_\_\_

This form authorizes Industrial Maintenance Specialties, Inc. to make charges to your credit card for products and/or services. A processing fee of 3% of the total amount will be added to the transaction. Customers who pay regularly by credit card will be billed at the time of service completion. A receipt will be included with the paid in full invoice.

Check here if all of your transactions are on this card \_\_\_\_\_

**or**

Check here if this card is for an occasional purchase only. \_\_\_\_\_ We normally pay by check.

We will give verbal authorization for processing.

**or**

Check here if only for a one time purchase \_\_\_\_\_ Amount \$ \_\_\_\_\_

Fill out and fax or email back to (770) 271-7663 or sales@imsrepairs.com