

CREDIT CARD AUTHORIZATION FORM

**PRINT AND COMPLETE THIS AUTHORIZATION FORM AND EITHER
EMAIL TO INFO@RWGLASSDOORS.COM OR FAX TO (586) 920-2814**

*All information will remain confidential
For any Credit Card payment over \$5,000.00, a 3% processing fee will be added.*

Name on Card: _____

Billing Address: _____

Shipping Address: _____

Credit Card Type: ___ Visa ___ Mastercard ___ Discover ___ AmEx

Credit Card Number: _____

Expiration Date: _____

Card Identification Number: _____ (3 digit code located on the back of the credit card)

Amount to Charge: \$ _____ (USD)

By signing this form I authorize RW International to charge the amount listed above to the credit card provided herein.

I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

I agree to check for any damage incurred during shipping from RW International before truck is unloaded.

At time of delivery, if product is damaged in any way I will refuse shipment and send back to RW International.

After shipment is unloaded, RW International is not responsible for any damages. After possession of shipment has transferred to me or my employees I waive my right to hold or reverse funds to RW International from the above credit card.

Cardholder -- Please print name, sign, and date below.

Print Name: _____

place photo id here before sending

Signature: _____ Date: _____