



Customer Profile/Credit Card Authorization Form

201 Commerce Drive, Montgomeryville, PA 18936

Phone 215-393-4700 Fax 215-393-4800

PROFILE:

Business Name: Contact: Phone #: Fax #: County: BILLING Address: City: State: Zip: SHIPPING Address: City: State: Zip: Email: Business Website: Ownership Type: Corporation Partnership Sole-Proprietor Fed Tax ID #: Years in Business: Primary Sales Area: Primary Business: Primary Equip Line: # Employees: Annual Sales: Expected Annual Aztec Purchases:

PRINCIPALS:

1) Name: Title: Driver's License #: State: 2) Name: Title: Driver's License #: State:

CREDIT CARD INFO: **REQUIRED TO SET UP CUSTOMERS FOR CASH AND CREDIT CARD ORDERS**

Credit card fraud is on the rise in the United State and around the world. In an effort to protect both our customers and ourselves from fraud, we require all credit card customers to complete this Customer Profile / Credit Card Authorization Form. (Please note that you can choose either blanket authorization to allow Aztec to charge your card each time you place an order, or a one-time authorization which this form will need to be completed each time you order).

I, (must be Cardholder) authorize Aztec Products, Inc to charge my credit card listed below. I acknowledge my understanding that no goods may be returned to Aztec without a Returned Goods Authorization, that the sole remedy to warranty issues is to return parts for repair / replacement, and that Aztec neither warranties equipment applications nor offers a money-back guarantee.

PLEASE SELECT ONE:

- This is a one-time authorization (I will have to complete this form for each order) This is a blanket authorization to use my credit card when I, and only I, place orders for my company. This is a blanket authorization to use this corporate credit card when anyone places orders for my company.

Type of Card: VISA MASTERCARD AMERICAN EXPRESS DISCOVER Credit Card #: Expiration Date: Name on Card: Card Verification Code: Credit Card Billing Address: City: State: Zip:

As the credit card holder, I hereby authorize the charge on this card and receipt of merchandise at the SHIPPING address listed above.

Cardholder's Signature: Date: Cardholder's Printed Name: Title:

Your completion of this authorization form helps us to protect you, or valued customers, from credit card fraud. All information entered on this form will be kept strictly confidential by Aztec Products, Inc.