## Credit Card Authorization Form <u>Yellow Diamond Raleigh Durham Taxi</u> <u>Cab</u>

CREDIT CARDHOLDER INFORMATION									
NAME ON CREDIT	CARD								
TYPE OF CREDIT CARD		VIS	Д	MC	AM	1EX	DISCOVER	OTHER	
TYPE OF ACCOUNT		PERSONAL				BUSINESS			
COMPANY NAME									
ACCOUNT NUMBER									
EXPIRATION DATE									
BILLING ADDRESS									
CITY				STATE			ZIP CODE		
PHONE			1	EMAIL		FAX NUMBER			
TYPE OF CHARGES		Taxi Transportation							
AUTHORIZED AMOUNT									
DATES OF CHARGES									
*Recurring Charge		Yes No		List Dates					
*Circle Yes or No									

## **AUTHORIZATION OF CARD USE**

I certify that I am the authorized holder and signer of the credit card referenced above.

I certify that all information above is complete and accurate.

I hereby authorize collection of payment for all charges as indicated above to Yellow Diamond Raleigh Durham Taxi Cab. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. I understand this is only for up to this amount during the time period of "DATES OF CHARGES" referenced above.

CARDHOLDER NAME		
SIGNATURE	DATE	

Fax this completed and signed Credit Card Authorization Form to <u>919-729-5040</u>