

Ward Waste Solutions

Automatic Credit Card Billing Authorization Form

If you would like to enjoy the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Client Information ""(To be completed by merchant)""

Client name: _____ Client account number: _____ Phone: _____
non-applicable

Payment Information ""(To be completed by merchant)""

I authorize Ward Waste Solutions to automatically bill the card listed below as specified:

Amount: _____ Frequency: Weekly Monthly Quarterly Annually
Start billing on: ____/____/____ End billing when: Contract expires: _____
 Client provides written cancelation

Credit Card Information ""(To be completed by client)""

Ward Waste Solutions accepts the following credit cards:

Credit card type: _____ Credit card number: _____ Expires: ____/____/____

Cardholder's name: _____ Cardholder's ZIP code (required): _____
(as shown on credit card) (from credit card billing address)

Client's signature: _____ Date: _____

Security (CVV) Code: _____

Thank you for your business!
Ward Waste Solutions