

**CREDIT CARD AUTHORIZATION FORM**

Payment Information (All information is required) Make sure all information matches the billing information with your credit card company

**Company Name** \_\_\_\_\_

(The "Company" Enter even if not on credit card)

**Credit Card Holder Name:** \_\_\_\_\_

(if name differs from contact name on account form please provide a letter authorizing the contact to use your credit card)

**Billing Address:** \_\_\_\_\_

**Billing City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Credit Card # :** \_\_\_\_\_

**Bank Name:** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_ / \_\_\_\_\_

**CVV2 / CID #** \_\_\_\_\_

(on Master Card, Visa or Discover it is the last 3 digit number on the back of the card in the signature panel)

**AMOUNT US\$ :** \_\_\_\_\_

Amount in words \_\_\_\_\_

THIS AGREEMENT ALLOWS YASH IMPORT INC TO CHARGE TO YOUR CREDIT CARD A NON REFUNDABLE APPLICATION FEE PERTAINING TO YOUR APPLICATION FOR UNSECURED LINES OF BUSINESS. I CERTIFY THAT THE INFORMATION ABOVE IS CORRECT AND THAT I UNDERSTAND THE PURPOSE OF THIS CHARGE.

Agreed to and accepted by: \_\_\_\_\_

Name Please Print

Title

\_\_\_\_\_  
Signature, personal guarantor

\_\_\_\_\_  
Date

**ALONG WITH THIS FORM, PLEASE FAX YOUR PHOTO ID AT 212 658 9801 or email at  
sales@yashimports.com**