

## PAYMENT AUTHORIZATION FORM

Please complete this form to authorize Legacy Diesel and Marine, LLC to charge your Credit Card or Checking/Savings Account listed below. You may cancel this authorization at any time by contacting us in writing. This authorization will remain in effect until cancelled.

### BILLING DETAILS

**CUSTOMER OR BUSINESS NAME:** \_\_\_\_\_

**BILLING ADDRESS:** \_\_\_\_\_

**BILLING ZIP CODE:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

### CREDIT CARD INFORMATION

*I understand that a 3.5% service charge will be added to my balance for each credit card transaction.*

**CARD TYPE:**     MASTERCARD     VISA     DISCOVER     OTHER: \_\_\_\_\_

**CARDHOLDER NAME (AS SHOWN ON CARD):** \_\_\_\_\_

**CREDIT CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE (MM/YY):** \_\_\_\_\_

**SECURITY CODE (CVV):** \_\_\_\_\_

### FINANCIAL INSTITUTION (ACH) INFORMATION

**ACCOUNT TYPE:**     CHECKING     SAVINGS     OTHER: \_\_\_\_\_

**ACCOUNTHOLDER NAME:** \_\_\_\_\_

**NAME OF FINANCIAL INSTITUTION:** \_\_\_\_\_

**ROUTING NUMBER:** \_\_\_\_\_

**ACCOUNT NUMBER:** \_\_\_\_\_

*In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) or a Credit Card transaction being declined, I understand that Legacy Diesel and Marine, LLC may, at their discretion, attempt to process the charge again within 30 days, and I agree to an additional \$30.00 charge for each attempt returned NSF or declined transaction, which will be initiated as a separate transaction from the initial charge. I certify that I am an authorized user of this credit card and/or checking/savings account and will not dispute these transactions with my financial institution.*

*I AUTHORIZE **LEGACY DIESEL AND MARINE, LLC** TO CHARGE MY CREDIT CARD OR DEBIT MY CHECKING/SAVINGS ACCOUNT LISTED ABOVE FOR SERVICES RENDERED. I UNDERSTAND THAT MY INFORMATION WILL BE SAVED ON FILE FOR FUTURE TRANSACTIONS ON MY ACCOUNT WITH LEGACY DIESEL AND MARINE, LLC.*

**CUSTOMER SIGNATURE**

**DATE**