



**AMERICAN CONTRACTORS  
EQUIPMENT COMPANY**

## **CREDIT CARD AUTHORIZATION FORM**

Phone: (412) 828-6960 / Fax: (412) 828-6285

Company Name ("Applicant")

The purpose of this form is to obtain authorization and information for credit card purchase(s) with American Contractors Equipment Company ("ACEC"). Please complete and sign this form and return via fax to ACEC. By signing below, Applicant is authorizing ACEC to use the information provided for payment of invoices.

### **Credit Card Information**

Card Type

Master Card       Visa       American Express

Name of Cardholder (as it appears on card)

Card Number

Expiration Date

CVC Code (last 3 digits of the number located on the back of the card)

Credit Card Billing Address

### **Agreement**

As an authorized representative of Applicant, I agree all invoices are to be paid within 10 days and are subject to finance charges of 1.5% per month on balances due. Notice of contested charges must be made in writing within 7 business days of the invoice date. If a Tax-Exemption Certificate is not returned with this form, applicable state and local taxes will be charged. Applicant authorizes ACEC to charge Applicant's credit card for all invoices issued on Applicant's account. Delinquent balances are subject to liens and collection procedures. All court costs, attorney fees, or charges associated with collecting on a delinquent account are the responsibility of the Applicant. It is Applicant's responsibility to keep ACEC's files updated with Applicant's most current billing address and telephone number. ACEC reserves the right to revoke Applicant's credit privileges at any time. ACEC can delay enforcing or fail to enforce any of its rights under this Agreement without losing any of them.

I have read, understand, and accept the terms stated within this Agreement, have provided true information to the best of my knowledge, and have retained a copy of this Agreement for my records.

Authorized Cardholder's Signature

Title

Date

Thank you for your business.

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