



Credit Card Authorization Form [3rd Party Payment]

If you are paying by Credit Card, this form must be completed, signed and returned to **Best Choice Appliance Leasing LLC** prior to charging Initial Fees* or monthly lease/rental payment.

- Choose One: Charge my Credit Card for Initial Fees only and keep card on file \$_____
- Charge my Credit Card for Initial Fees (\$_____) on delivery and again every month for monthly fees (\$_____) on the _____ of each month.
(Monthly Payment Amount) (YOUR DUE DATE)
- DO NOT** charge for Initial Fees. Charge monthly fee only (\$_____) due on the _____ of each month
(YOUR DUE DATE) (Monthly Payment Amount)
- Charge OTHER: _____

Card Type: VISA MasterCard Discover

Full Name As It Appears On Credit Card:

Card Number: _____ Exp Date: ____/____ CVV: _____
(PLEASE RETURN WITHOUT NUMBERS FOR YOUR SECURITY / I am Authorizing BCAL to insert credit card information given over phone into this authorization form)

Home billing address for Credit Card:

Street: _____ Apt. # _____
City: _____ State: _____ Zip: _____
Home Phone# _____ - _____ - _____ Work Phone _____ - _____ - _____
Cell Phone _____ - _____ - _____

I hereby authorize **BEST CHOICE APPLIANCE LEASING, LLC** to charge my credit card for the fees described in accordance with the terms and conditions of the separate **RENTAL AGREEMENT** executed by _____ (*Customer's name*) until such time as the equipment is removed from residence by **BEST CHOICE APPLIANCE LEASING, LLC** or payment authorization is revoked in writing.

X _____
Card Holder's Signature

Date _____

*Initial payment = 1st month's lease/rental payment + Delivery & Service fees + Sales Tax

*Please FILL OUT FORM COMPLETELY, SIGN AND DATE; OTHERWISE, WE CAN NOT USE FORM FOR PAYMENT OR SET FOR AUTO DRAFT.

Rev. 01/2017

"THE BEST CHOICE YOU WILL MAKE TODAY!"