



Credit Card Authorization Form

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: _____

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 our separate RENTAL AGREEMENT until such time as the equipment is removed from residence by BEST CHOICE APPLIANCE LEASING, LLC and 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.

01/2017

"THE BEST CHOICE YOU WILL MAKE TODAY!"