

## CREDIT CARD AUTHORIZATION FORM

In order to accept credit card payment, the following agreement must be signed and returned to Torque Tools, Inc. by email [accounting@torquetoolsinc.com](mailto:accounting@torquetoolsinc.com), as your approval to our charges for products and services purchased from Torque Tools, Inc.

**Customer Information:**

<b>Company Name:</b>		<b>Cust. #</b>	
<b>Cardholder Name:</b>			
<b>Billing Address:</b>			
<b>City, State, Zip:</b>			
<b>Phone:</b>			
<b>Email address:</b>			
<b>Shipping Name:</b>			
<b>Address:</b>			
<b>City, State, Zip</b>			
<b>Phone:</b>			
<b>*Credit Card #:</b>			
<b>*Exp. Date:</b>			
<b>*CVV#:</b>			
<b>*Billing Zip Code:</b>			

**Consent**

I, the undersigned cardholder, authorize the merchant known as Torque Tools Inc. to charge my credit card for purchases related to goods and services. I agree that my information may be saved by the merchant for future payments and understand that this can be revoked at any time with request.

\_\_\_\_\_  
Credit Card Holder's Signature

\_\_\_\_\_  
Date