

MARINE VACUUM SERVICE, INC.

PHONE: 206-762-0240 FAX: 206-763-8084

OR SCAN AND EMAIL TO:

AR@MARINEVACUUM.COM

Credit Card Authorization



Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Client: _____

Check box: VISA MASTERCARD AMERICAN EXPRESS

Credit Card: _____ Expiration Date: _____

Security Code _____

Credit Card Holder information (must match your credit card billing information)

Name as it appears on credit card: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone Number _____

I, _____ authorize Marine Vacuum Service, Inc. to charge my credit card above for agreed upon services. I understand that my information will be saved to file for future transactions on my account.

Authorized Signature: _____ Date: _____

If you do not want Marine Vacuum Service, Inc. to keep your credit card on file please check the box below.