



SHELBURNE FALLS, MA.  
**413-625-6463**

### Contractual, or blanket credit card payment authorization form

Sign and complete this form to authorize West County Equipment Rental to make contractual, or blanket debits to your credit card listed below.

*Please check the option that applies you.*

(For contractual debits) By signing this form, you give us permission to debit your account for the contract number on or after the date indicated.

(For blanket debits) By signing this form, you give us permission to debit your account for all unsettled debit, or recurring debit, on or after the date indicated.

---

#### Please complete, and return the information below:

I \_\_\_\_\_ authorize West County Equipment rentals to charge my credit card on or after this date \_\_\_\_\_. This payment is for rental of equipment.

Billing Address \_\_\_\_\_ Phone# \_\_\_\_\_

City, state, zip \_\_\_\_\_ Email \_\_\_\_\_

Account Type:  Visa  MasterCard  AMEX  Discover

Cardholders Name \_\_\_\_\_

Account Number \_\_\_\_\_ CVV (security code) \_\_\_\_\_

Exp. Date \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT \_\_\_\_\_

*I authorize the above named business to charge the credit card indicated in the authorization form according to the terms outlined above. This payment authorization is for the goods, and or services described above, for the contract or blanket contract indicated above, and is valid for contractual and or blanket use only. I certify that I am an authorized user of this credit card, and will not dispute the payment with my credit company; so long as the transaction corresponds to the terms indicated in the above form.*

**Office use:** contract number for contractual debits # \_\_\_\_\_. ACCT# \_\_\_\_\_.