



CREDIT CARD AUTHORIZATION FORM

I, _____, AUTHORIZE PROVIDENT SEDAN & LIMOUSINE SERVICE TO CHARGE MY CREDIT CARD FOR SERVICES PROVIDED BY PROVIDENT SEDAN & LIMOUSINE SERVICE AND/OR THEIR AFFILIATES.

Card Type (circle one): M/C / VISA/ DINERS CLUB/ AMEX/ AMEXOPTIMA

Card Number: _____

Expiration Date: ____ / ____ / ____

Security Code: _____

Card Holders Name: _____
(exactly as it appears on the credit card)

Billing Address: _____

City _____

State _____ Zip _____

Card Holder Phone Number:() _____

Charge Amount: \$ _____

Card Holder Signature: _____

Card Holder Name (PRINT): _____

Date Of Signature: ____ / ____ / 200__

****MUST PROVIDE PHOTO COPIES OF CREDIT CARD (FRONT AND BACK) AND DRIVERS LICENSE****

FAX FORM AND REQUESTED DOCUMENTS TO 214-377-4226