



3400 2<sup>nd</sup> Avenue South | Birmingham, AL 35222  
(P) 205.251.4060 (F) 205.251.7010

# CREDIT CARD AUTHORIZATION

By filing out and signing the form below, I agree for my credit card to be charged the total amount listed on the attached invoice in accordance with the card issuer agreement.

NAME \_\_\_\_\_ (as listed on card)      CARD TYPE \_\_\_\_\_ (Visa, M/C, Amex, Discover)

CARD# \_\_\_\_\_ (16 digit number)      EXP DATE \_\_\_\_\_ (MM / YY)      CVV \_\_\_\_\_ (3 or 4 digit)

BILLING ADDRESS \_\_\_\_\_ (must match what is on bankholder's file )

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL AMOUNT CHARGED \_\_\_\_\_ TOW TICKET# \_\_\_\_\_

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

Please fill out COMPLETELY and fax back with a photocopy of your Driver's License and the Credit Card to be charged.