



JUNK REMOVAL & DUMPSTER RENTALS

# Visa/Mastercard/American Express Authorization Form

11403 199 Street  
Edmonton, AB  
T5S 2C6  
P: 310-3867 (no area code required)  
F: 780-414-2077  
E: [bookme@310DUMP.com](mailto:bookme@310DUMP.com)  
[www.310DUMP.com](http://www.310DUMP.com)

To: Kash Ventures Ltd. o/a 310-DUMP (the "Company" or "310-DUMP")

Type:  Visa  Mastercard  American Express

Customer(s) Name(s) \_\_\_\_\_

Business(s) Name(s) (if different from above) \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

### Card Holder Information:

Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

Card Number

Expiry Date  /  Security Code \_\_\_\_\_

I/We (the above named customer(s) authorize 310-DUMP to charge my/our credit card indicated above for payments payable to 310-DUMP in respect to any and all amounts owing for services rendered, and any financing charges, and any products purchased by me or our business.

Each payment shall be the same as if I/we had personally presented the credit card and signed the receipt authorizing to pay 310-DUMP.

I/We will notify 310-DUMP promptly in writing or by telephone if I/we change any information pertaining to the credit card.

I/We understand that the Credit Card Company is not responsible to verify whether these payments are properly debited to my/our account.

I also authorize and give permission to 310-DUMP to process credit card payment(s) for any and all unpaid invoices owing by me personally or my business if unpaid within 30 days of service being provided.

I/We am/are all the persons who are required to sign on the above account.

I/We have received a signed copy of this authorization form.

Date \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_

Print Cardholder's Name \_\_\_\_\_

