

waste containers & portable restrooms 230 Business Drive, Hull, GA 30646 706-549-2727 (ASAP) Fax 706-548-0226

## **Credit Card Authorization Form**

## Please Return Via Fax or Scan/Email

Account #	Acco	ount Name
(Please Print or Type)		
First Name	Middle Initial	Last Name
Company Name	I	
Address		
City	State	Zip
Phone #	Fax #	Email (for receipt)
( ) -	( )	-
Please charge my:  Credit Card No.	Visa 🗌 Master (	Card
Name As On Credit Card.		
Full Billing Address		
Expiration Date		Amount Authorized / Frequency
		\$
Authorized Signature		Today's Date