Credit Card Authorization Form

Infiniti Equipment Ltd - 6337 166a street, Surrey B.C., V3S 0W1 - Canada

Name on the Card: _____

Type of Card: _____ (Only Mastercard or Visa)

Card Number: _____

Exp. Date Month _____ Year _____

CVV Security Code: _____

Billing Address: _____

City _____ Postal Code _____ Province or State _____

This Authorization is valid until I provide you with written cancellation.

I authorize Infiniti Equipment Ltd to bill charges to the above card

Signature: _____ Print: _____

Date: _____

Customer's Phone Number: _____

Please fill out this Form and Sign it.
Email it back to ac@infinitiequipment.com