



817-891-8555

[www.SunshineLawnCare.net](http://www.SunshineLawnCare.net)

## Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN VIA:

Email: [info@SunshineLawnCare.net](mailto:info@SunshineLawnCare.net) OR FAX: 927-692-8326.

*All information will remain confidential.*

**SERVICE ADDRESS:** \_\_\_\_\_

State / Zip: \_\_\_\_\_

### CREDIT CARD INFORMATION

Cardholder Name: \_\_\_\_\_

CIRCLE Card Type:    Visa    Mastercard                      AmEx                      Discover

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date:                      \_\_\_\_\_ - \_\_\_\_\_                      3-4 digit security code: \_\_\_\_\_

Check here if Billing address is SAME as Service address: \_\_\_\_\_

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

State / Zip: \_\_\_\_\_

**AGREED PRICE FOR SERVICES:** \$ \_\_\_\_\_ (plus state tax)

**SERVICES TO BE PROVIDED:** \_\_\_\_\_

I authorize Sunshine Lawn Care to charge the agreed amount listed above to my credit card provided herein. Credit card may be charged after each service or on a monthly basis after multiple services. I agree that Sunshine is responsible for providing the services described herein and I am responsible for providing timely payments.

### PROPERTY OWNER / Authorized to perform work:

This agreement is executed with the understanding that the Customer is either the legal owner or is authorized by the legal owner to request the services described herein at the property service address listed above.

### Cardholder – Print Name, Sign and Date Below:

My signature below signifies that I accept and agree to all terms and conditions, as stated in this agreement.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

DATE: \_\_\_\_\_