



Card authorization form Klip & Kut Lawn Care, Inc.

I, _____, give permission to Klip & Kut Lawn Care, Inc. to charge
Buyer name Business name

my card for the following purchases. My card details will be stored in my profile and will only be used for approved purchases.

_____ Amount authorized

_____ Cardholder email

_____ Product/service

All fields required

Card information

Card type

- MasterCard
 Discover
 VISA
 AMEX

_____ Other

_____ Cardholder (Name on card)

_____ Card number

_____ Expiration date
(MM/YYYY)

_____ ZIP code
(From credit card billing address)

Recurring payments information

Charge every:

Week Month Quarter Other _____

Charge on this date _____

(For example, the 1st of every month)

_____ Payment amount

_____ Product/service sold

Terms of agreement

(For example, cancellations must be received 1 week prior to expected billing date)

Email receipts

Mail receipts to:

To cancel, contact: _____
(Name and email)

_____ Customer signature

_____ Date