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CREDIT CARD AUTHORIZATION APPLICATION

please fill out and fax to +41/71 987 11 33

Company name:

Card holder name:

Credit card type: ☐ Visa ☐ Mastercard

Number:

Expiration date:

Three digit code on back of Mastercard or Visa:

Card billing address:

Reference: Your P.O. #

I here with authorize **Hedinger Aircraft Components Ltd**., to debit my creditcard.

Purchase order:

Card holder signature:

Date:

Does shipping address differ from billing address? ☐ YES ☐ NO

If yes, is it authorized by the cardholder to ship to the address indicated on the PO?

☐ YES ☐ NO

Do you wish for Hedinger Aircraft Components Ltd. to use this card info on future orders?

☐ YES ☐ NO

If yes, do you require that we advise you that we are using this card again?

☐ YES ☐ NO

Remarks:

This authorization is only valid for the purchase through Hedinger Aircraft Components Ltd. This form must be on file before Hedinger Aircraft Components Ltd. is able to accept a credit card for payment of merchandise.

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