



### Credit Card Authorization Form

We accept:



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

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

Name on Card: \_\_\_\_\_

(If different than customer name)

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

City, State, Zip: \_\_\_\_\_

☐ Please use this card to pay for one order

Order # \_\_\_\_\_

☐ Please keep this card on file for future orders

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

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

I understand the above referenced payment or payment schedule for services as defined in the Proforma Invoice, verbal or written quote and the policy on refunds for cancellation of services. I agree to pay the above total amount according to the card issuer agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Pease complete this form with all information requested and email to UV Superstore at the above email address. No orders can be released without this completed and signed form on file at UV Superstore.**

Cobra   
Eagle 

Coyote   
Leopard 

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*One Source for All Your UV Needs!*