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One Time Credit Card Payment Authorization Form

Complete and sign this form to authorize **Dwight's Auto Wrecking** to make a one time debit to the credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the following information:

I, _____, authorize **Dwight's Auto Wrecking** to charge my
(full name)

account indicated below for \$ _____ on or after _____.
(amount) (date)

This payment is for _____.
(description of goods/services)

Billing Address _____

Phone # _____

City, State, ZIP _____

Email _____

Account Type _____

Cardholder Name _____

Account Number _____

Expiration Date _____ CVV _____ (3 digit # on back of Visa/MC, 4 digits on front of AMEX)

Signature _____

Date _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. The payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company so long as the transaction corresponds to the terms indicated on this form.