

Villas and Condos.com, LLC CREDIT CARD AUTHORIZATION FORM

Please complete all of the fields below and fax or mail to:

Villas and Condos.com, L.L.C.
13825 SE 76th PI
Newcastle, WA 98059
Email: info@villasandcondos.com
Phone: 425-282-4743
Fax: 425-282-4792

FIRST NAME:	
LAST NAME:	
BILLING ADDRESS:	
CITY:	
STATE:	
ZIP CODE:	
COUNTRY:	
PHONE #:	
CREDIT CARD NUMBER:	
CREDIT CARD TYPE:	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
EXPIRATION DATE:	
NAME ON CARD:	
AMOUNT OF TRANSACTION:	\$

This completed form activates credit card authorization for payment. In lieu of my credit card imprint, I authorize Villas and Condos.com, L.L.C. to charge my credit card for the amount shown above. This form is held in the strictest confidence.

I agree to pay the above charge(s) according to the card issuer's agreement. I understand that my signature on this contract will serve as my authorization on the credit charge slip and as a signature on file for all authorized charges and outstanding balances now and in the future.

I UNDERSTAND THAT USING A CREDIT CARD FRAUDULENTLY IS ILLEGAL AND CHARGES WILL BE PURSUED TO THE FULL EXTENT OF THE LAW.

Signature: _____

Date: _____