



# Service Freight Systems Inc

2201 Brant Street, Unit 111 & 112  
Burlington, On L7P 3N8

## CREDIT CARD AUTHORIZATION FORM

### CARDHOLDER INFORMATION

COMPANY NAME:

NAME ON CREDIT CARD:

CARDHOLDERS BILLING ADDRESS:

CITY:

PROVINCE / STATE:

TELEPHONE:

EMAIL:

### PAYMENT AUTHORIZATION

Type of Credit Card (Check One):  Visa  MasterCard

CREDIT CARD NUMBER: \_\_\_\_\_

EXP. DATE \_\_\_\_\_

CARD IDENTIFICATION NUMBER: \_\_\_\_\_

\* Please reference the picture to the right for the location of this number on your card. (CVV2)



Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

I certify that I am the authorized cardholder and signer of the Credit Card referenced above.  
I certify that all information above is complete and accurate.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

### NOTE - SFS Policy for Credit Card Charges:

You are liable for any unforeseen extra charges, such as changes in trailer footage, detention time, driver assist, bond fees, missed pick-up fees, etc.

Service Freight Systems reserves the right to charge your credit card for any unforeseen charges.

Should any unforeseen charge occur, SFS will contact you prior to charging your credit card.

In the event of a declined charge, unauthorized charge or cancelled credit card after the completion of the shipment will be construed by SFS as a deliberate attempt on the part of the cardholder to avoid payment for our services. We will make every effort to collect defaulted payment through any and all legal means necessary, all costs being incurred by the cardholder.

By signing this form you agree that you understand the above policy.

Authorized Signature: \_\_\_\_\_

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

PLEASE COMPLETE ALL FIELDS OF THIS FORM AND FAX TO SERVICE FREIGHT SYSTEMS AT:  
905-319-7580

 [servicefreight.com](http://servicefreight.com)