

Fred Beans Parts Inc
131 Doyle Street
Doylestown, Pa 18901

CREDIT CARD ON FILE AUTHORIZATION

Business Contact Information

Company Name:

Phone:

Fax:

Email:

Address:

City:

State:

Zip Code:

Credit Card Information

Credit Card Billing Address:

City:

State:

Zip Code:

Name on Credit Card:

Card Type: (Please Circle one) Visa Mastercard American Express

Card Number:

Expiration Date: / sdfsdfsf CCV

Receipt Required: (Please check one)

- Fax Receipts to: _____
- Email Receipts to: _____
- Mail Receipts to: _____

Credit Card Use

I understand that Fred Beans Parts Inc. will hold the information here in, in a secure manner and process payments and credits when deemed necessary per the agreement below. I understand that if the card payment will not process, the account will be immediately suspended until such time that the account is back in good standing. Credit cards on file can be removed at any time by my myself or by Fred Beans Parts Inc.

Credit Card Use

1. At time of delivery, invoice will be signed for and invoices will be processed to credit card on file.
2. Drop ships or direct ship payments will be processed at time of order.
3. Powertrain Cores - will be charged to cards if they are not returned to Fred Beans Parts Inc. within 30 days.

Signatures

Title:

Date

Title:

Date

Credit Card on File Authorization form Return Instructions

This form can be sent back to Fred Beans Parts Accounting by fax, email or mail

Fax number - 267-880-3957

Email - jwatts@fredbeans.com

Mail: Fred Beans Parts
131 Doyle Street
Doylestown, Pa 18901
Attn: Jamie Shannon

Photos or jpeg attachments are not acceptable methods of return.