****

**Fargo Rentall Fargo Rentall Tents & Events Bismarck Rental Moorhead Rentall**

**1002 25th St S. 3201 32nd St S. 909 25th St N. Fargo 1356 Airport Rd. 1116 Main Ave.**

**701-234-1900 701-893-1900 701-532-1448 701-250-1123 218-233-1559**

**Credit Card Payment Authorization Release Form:**Credit Card Type: (*choose one)* VISA MASTERCARD AMEX DISCOVER
Credit Card #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp Date \_\_\_\_\_\_\_\_\_V-code\_\_\_\_\_\_\_\_\_ **Billing Information**Company Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Card Holder Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Card Billing Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 City :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State :\_\_\_\_\_\_\_\_\_ Zip Code : \_\_\_\_\_\_\_\_\_
Phone Number :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_authorize **Fargo Rentall** to charge the above
 *(Name) (Company)*card for all **INITIAL CHARGES, EXTRA TIME CHARGES, DAMAGES, REPAIRS, FUEL, SALEABLES, SHIPPING AND ALL OTHERS CHARGES ACCUMULATED BY ME, MY COMPANY, OR MY AGENT.**

I guarantee payment for any purchases made with the credit card account provided above, including renewed cards.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*Signature of owner/card holder Date*

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

**Shipping Information**If shipping address is different than billing address.

Receivers Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Shipping Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_