



CREDIT AND DEBIT CARD AUTHORIZATION FORM

1201 S. JELLYCK AVE., CITY OF INDUSTRY, CA 91748

TEL: (626) 581-4790 EMAIL: info@nextarusa.com

**** Credit cards incur a 2.5% surcharge to your entire total. Debit cards do not incur a surcharge.**

Cardholder's Card Information

Customer Name: _____

Cardholder's Name: _____

Cardholder's Address: _____

City: _____ State: _____ Zip Code: _____

Card Number: _____ Exp. Date: _____

Card Type: VISA MASTERCARD DEBIT CVC: _____
(CHECK ONE) AMEX DISCOVER (3 Digit # Back of card)

Signature: _____
(Authorized User)

Print Name: _____
(As signed above)

**SIGNATURE authorizes Nextar, Inc., to process charges to the card listed above and warrants signer as an authorized user of this credit card.
**All charges to your customer account will be billed to this card if the ONE TIME USE ONLY area is not initialed.*

**INITIAL FOR ONE
TIME USE ONLY _____

Amount: \$ _____

Estimate # _____

Date of Charge: _____

Phone # _____

>PLEASE INCLUDE A PHOTO COPY OF THE CARD (Front and Back) AND ID<<

******PLEASE EMAIL TO YOUR SALES REP OR TO INFO@NEXTARUSA.COM******

For office use only:

visited showroom

sample doors