

7 Elm Street  
Westbury, NY 11590

www.ccsprinkler.com  
Office: (516) 334-2042  
Fax: (516) 338-0388



Please accept this letter as authorization to use my credit card as payment for any balance which is unpaid in a timely manner.

**Today's Date:** \_\_\_\_\_

Customer Name: \_\_\_\_\_  
(Full name as it appears on the credit card)

Customer Full Address: \_\_\_\_\_

Address/Billing Address: \_\_\_\_\_  
(If different)

**\*\*BILLING ZIP CODE\*\*** \_\_\_\_\_

Type of Credit Card: \_\_\_\_\_  
(VISA / MASTERCARD / DISCOVER / AMERICAN EXPRESS)

Credit Card #: \_\_\_\_\_

Expiration Date (MM/YR): \_\_\_\_\_

\*Security numbers on the back of the card\*: \_\_\_\_\_

\*American Express has 4 digits on the front right\*: \_\_\_\_\_

Customer # / Contact #: \_\_\_\_\_

Email: \_\_\_\_\_

*All information above is correct and by signing this form I, \_\_\_\_\_,  
authorize C & C Sprinkler Inc. to apply your credit card to any charges that you incur.*

**Cardholder's Signature:** \_\_\_\_\_

Please fill out form completely and fax or mail with a copy of cardholder's driver license.