
CREDIT CARD AUTHORIZATION FORM



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CREDIT CARD INFORMATION (REQUIRED WHEN PAYING WITH A CREDIT CARD. PLEASE PRINT CLEARLY)

CREDIT CARD (CHECK ONE) VISA MC AMEX DISCOVER

C/C #: _____ CVV#: _____

NAME ON CREDIT CARD: _____

C/C EXPIRATION DATE: ____ / ____ / ____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

QUANTITY: 1 DESCRIPTION: APPRAISAL SERVICES RENDERED

APPRAISAL FEE:\$ _____ C/C FEE:\$25 TOTAL: _____

SIGN HERE: _____ DATE: ____ / ____ / ____

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any charges due thereon) subject to and in accordance with the agreement governing the use of such card.

