



Bassett International
Chauffeured Transportation Services

For Office Use Only

Customer Acct. #: _____

Entered by: _____

SIGNATURE ON FILE AUTHORIZATION FORM

PLEASE CHECK ONE:

American Express

Visa/MasterCard

Credit Card number: _____ Expiration date: _____

CCV (Security Code): _____ (Most cards have a 3-digit number printed at the top of the signature strip on the reverse side of the card. Others, like American Express cards for example, have a 4-digit number printed on the front of the card, above the account number)

Cardholder's Name (as it appears on card): _____

Company Name (if corporate card): _____

Billing address for credit card: _____

Please indicate listing for account name: _____

Customer Service phone # on back of credit card (mandatory): _____

THE FOLLOWING MUST BE COMPLETED BY THE CARDHOLDER FOR THE CREDIT CARD INDICATED ABOVE & SIGNED BY THE AUTHORIZED USER ONLY:

I, _____ AUTHORIZE BASSETT INTERNATIONAL CORP. TO PROCESS THE ABOVE CREDIT CARD AS "SIGNATURE ON FILE" FOR GROUND TRANSPORTATION SERVICES.

PLEASE LIST ALL PERSONS AUTHORIZED TO CHARGE SERVICES TO THIS CARD:

1. Name: _____ Title: _____ Phone: _____

2. Name: _____ Title: _____ Phone: _____

3. Name: _____ Title: _____ Phone: _____

4. Name: _____ Title: _____ Phone: _____

A COPY OF BOTH SIDES OF THE CREDIT CARD AND THIS FORM MUST BE SIGNED AND FAXED TO (800)660-6141**

SIGNATURE OF CARD HOLDER: _____ DATE: _____

PHONE NUMBER: _____ FAX NUMBER: _____

EMAIL: _____

REFERRED BY: _____

INDIVIDUAL'S NAME

COMPANY'S NAME