



CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize Renaissance Roofing, Inc.
to charge my following credit card for roofing services performed at:

These services have been completed in full and to my complete satisfaction. I
authorize payment on my credit card as follows:

Type of Card: *(circle one)* Visa or Mastercard or AMEX

Name as it appears on card: _____

Billing Address for card: _____

Credit Card number: _____

Credit Card Expiration Date: _____

3 Digit or 4 Digit Security Code on back of card (SCV#): _____

(This 3 digit number is located on the back of the signature strip after the credit card number for Visa/Mastercard.
For American Express it is the 4 digit code on the front of the card above the card number.)

Amount to be charged: \$ _____

Signature of Card Holder: _____

Date: _____