

CREDIT CARD AUTHORIZATION FORM

Cardholder's Name (Exactly as It Appears on Card)

Company Name

Credit Card Billing Address

City

State/Province

Zip/Postal Code

Country

Phone

Email for Payment Receipt

CREDIT CARD TYPE

Visa Master Card American Express

Visa/MasterCard: 3 Digit Code on Back of Card
American Express: 4 Digit Code on Front of Card

Credit Card Account Number

Expiration Date

Security Code

By signing below I, the cardholder, agrees that the billing address above is valid and that I am the authorized card holder and signer for the above credit card. I understand and agree to the terms set forth in this agreement and am specifically authorizing AXEON® Water Technologies to charge my Visa, MasterCard, or American Express Card. I further agree that in the event my credit card becomes invalid, I will provide AXEON Water Technologies with new valid credit card information. I also agree not to file a hostile chargeback without notifying AXEON Water Technologies ahead of time in writing and allowing for a resolution. In the event that the credit card on file is different or changed after receiving this form, the above credit card will be charged for any disputes along with a \$25 chargeback fee. A 3.25% surcharge will be added to my credit card payment. This charge is not greater than AXEON's total cost of accepting credit cards. By authorizing the payment of my bill, I am authorizing AXEON Water Technologies to charge my credit card this surcharge, subject to AXEON's Terms and Conditions. The surcharge is managed by AXEON's credit card processor and I will see this charge on my credit card receipt only.

ONE TIME USE ONLY

Charge the Amount Above

For Purchase Order #

KEEP ON FILE: As the card holder, I authorize AXEON Water Technologies to keep the credit card on file and charge for future invoices, due or past due.

PRE-AUTHORIZATION REQUIRED Authorization Valid Until _____ / _____ Initials _____

Printed Name

Title

Cardholder's Signature

Date