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CREDIT CARD AUTHORIZATION FOR RENTAL SECURITY DEPOSIT

PLEASE INCLUDE A COPY OF THE CREDIT CARD AND A PHOTO ID

Payment Type (Select One):

☐ VISA ☐ MASTERCARD

Credit Card #: _____

Expiration Date: ____ / ____

CSC: _____

For MasterCard or Visa, it's the last three digits in the signature area on the back of your card.

NAME ON CARD: _____

BILLING ADDRESS LINE 1: _____

BILLING ADDRESS LINE 2: _____

CITY: _____

STATE: _____

ZIP: _____

EMAIL: _____ | PHONE: _____

I authorize Whitney Supply to use this card for any repairs necessary for damage or loss of machine.

Client's Signature: _____

Name of Client in Print: _____

Name of Company: _____

Date of Agreement: _____