VOLVO VIN: _____

ERIE VO-VO, INC.
CREDIT AUTHORIZATION FORM

PLEASE READ THIS BEFORE YOU CONTINUE: FORM MUST BE COMPLETED IN FULL, SIGNED BY AN AUTHORIZED USER OF THE CREDIT CARD, ALONG WITH **A CLEAR COPY OF THE CREDIT CARD** FAXED TO 315-736-5324 AND RECEIVED BY ERIE VO-VO, INC BEFORE ANY ORDER CAN BE MADE. IF YOU FAIL TO COMPLY WITH THESE REQUIREMENTS WE WON'T BE ABLE TO PROCESS YOUR ORDER.

_____BY EXECUTING THIS
(NAME AS IT APPEARS ON CREDIT CARD)
AGREEMENT UNCONDITIONALLY AUTHORIZES ERIE VO-VO, INC TO CHARGE THE FOLLOWING CREDIT CARD:

CREDIT CARD TYPE: (CIRCLE ONE) VISA MASTERCARD AMEX DISCOVER

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ CVV 2 CODE: _____

FOR THE AMOUNT OF: $_____

CARDHOLDER'S BILLING ADDRESS (REQUIRED):

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PROVINCE: _____ COUNTRY: _____

BILLING AREA CODE AND TELEPOHNE No.:_____

DELIVERY ADDRESS (If Different):

_____

CITY: _____ STATE: _____ ZIP CODE: _____

PROVINCE: _____ COUNTRY: _____

DELIVERY AREA CODE AND TELEPHONE No.:_____

ORDER NUMBER: _____ BY: _____

_____ _____
CARDHOLDER AUTHORIZED SIGNATURE DATE

I CERTIFY THAT THE ABOVE STATEMENTS AND INFORMATION MADE IN THE AGREEMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I ALSO CERTIFY THAT I AM AUTHORIZED TO EFFECT CHARGES TO THE ABOVE CREDIT CARD NUMBER. IN THE CASE OF ANY ISSUES OR DISPUTES CONCERNING THIS TRANSACTION I WILL NOTIFY ERIE VO-VO PROMPTLY TO RECTIFY THE SITUATION PRIOR TO NOTIFYING MY CREDIT CARD COMPANY.

THIRD PARTY SHIPPING INFORMATION:

SHIPPING ACCOUNT #:_____
NAME:_____
STREET ADDRESS:_____ STATE:_____ ZIP CODE:_____
PROVINCE:_____ COUNTRY:_____
AREA CODE AND TELEPHONE #:_____
ORDER #:_____ BY:_____

ALL PURCHASES OVER $500.00 OR OUT OF THE COUNTRY MUST INCLUDE USER DRIVER LICENSE OR PASSPORT.