

CHARGE CARD AUTHORIZATION FORM

This letter is to authorize Bell Mitsubishi to process the following
charge to the charge card indicated below.

Cardholder's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: (Home) _____ (Work/Other) _____

Driver's License: State: _____ Number: _____

Customer's Name (if different): _____

Card Number: _____ Exp. Date: _____

Credit Card Type (circle one): M/C Visa Amex Discover

Issuing Bank: _____

VIN: _____

I hereby authorize Bell Mitsubishi dealership to use this card for the payment of the following transaction(s):

Deposit on Stock Number: _____

Charge Amount Authorized: _____

Signature: _____

Date: _____

Our Fax Number : 732-388-9413

**This form MUST be completed in full and signed by the authorized
card holder and submitted to Bell Mitsubishi
before any phone/online orders can be processed.**

Albert Chak
Internet Sales Manager
Bell Mitsubishi