



2 Meadow Street, Goldens Bridge, New York
Ph: (914) 232-5151 | Fax: (914) 232-4182

Credit Card Authorization Form

Company Name:

Email:

Name on card:

Card Number:

Security Code:

Expiration Date

Billing Address:

City:

State: _

Zip code:

Phone Number

The individual listed below is authorized to use this account. As per NY state law, we are required to see a form of identification for this individual.

Name:

Phone:

ID #:

Address:

I hereby authorize King lumber to charge the credit card listed above without further notification. I understand that because of the nature of phone orders, there will be charges with no signed credit card receipt and times the credit card will not be swiped.

Cardholder Signature:

Date:

Please email the completed form to debbied@kinglumber.net or leave at counter.