



## Credit Card Authorization Form

### Fax Cover Sheet

Date: \_\_\_\_\_

From: Sales Team, Granada Tile

To: \_\_\_\_\_

Company: \_\_\_\_\_

Fax: \_\_\_\_\_

Number of pages including cover sheet: 1

#### **Authorization to Charge your Credit Card for Payment**

This is your authorization allowing Granada Tile to charge the credit card listed below for payment of listed Sales Orders or Invoices:

Total charge amount: \$ \_\_\_\_\_

#### Credit Card Information:

Type of Card (Visa or MasterCard only): \_\_\_\_\_

Card #: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address for Credit Card: \_\_\_\_\_

3 Digit Code on Back: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Invoices to be Paid - Number and Date: \_\_\_\_\_

Sales Order Number and Date: \_\_\_\_\_

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Client Signature: \_\_\_\_\_

Date: \_\_\_\_\_