



Ottawa
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 PO Box 11401, Station H
 Ottawa, ON K2H 7V1

GTA
 14 Anderson Boulevard
 Uxbridge, ON L9P 0G5

CREDIT CARD AUTHORIZATION FORM

To ensure compliance with Payment Card Industry security requirements and to provide you with payment options, we will accept credit card payments with written authorization from your company/you.

By signing this letter, you agree to the following terms and conditions:

- You authorize Kott Inc. to charge the credit card we have on file that is partially noted below with any or all purchases made by your company/you from Kott Inc.
- You acknowledge that payments will be processed in accordance with your credit terms, either prior to shipping, or within a one week period. Kott Inc. will provide copies of invoices paid with this credit card.
- You will provide us with your full credit card information over the phone; you accept that this information will be saved in our secure Vault in the Moneris Gateway platform.
- You are responsible to update Kott Inc. with any changes to this credit card information.
- The individuals who are authorized to pick up orders charged using this credit card are listed here: _____

Card Type		<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	Expiry Date: _____	CVD: To be provided over the phone
First 2 and Last 4 Digits of the Credit Card:		First 2 Digits	___	Last 4 Digits	___
Cardholder name:		_____			
Email:		_____			
Billing Address: _____					
City:	_____	Province:	_____	Postal Code:	_____
Tel:	_____				
Company Name:	_____			Customer ID #:	_____

This letter must be completed and signed by the person specifically authorized to use the credit card. By signing this letter, you are confirming that you are an authorized signer and can approve the use of this card.

Name: _____ Date: _____ Signature: _____

