



## Credit Card Authorization Form

*Note: All Credit Card Charges will be Charged with a 5% Credit Card Fee*

| Contact Information        |  |
|----------------------------|--|
| Company Name               |  |
| Contact Name               |  |
| Phone Number               |  |
| Email (To Receive Receipt) |  |
| Credit Card Information    |  |
| Card Holder Name           |  |
| Credit Card Number         |  |
| Expiration Date            |  |
| Security Code              |  |
| Billing Zip Code           |  |

The undersigned hereby authorizes Torque & Assembly Solutions to charge the above credit card for agreed upon purchases

|           |  |
|-----------|--|
| Date      |  |
| Signature |  |

*Please Email Completed Form to [TASTOOLS@TASTOOLS.COM](mailto:TASTOOLS@TASTOOLS.COM)*