

F A R M I N G V I L L E M A S O N R Y & C O N C R E T E S U P P L Y , I N C .

**909 Horseblock Road Farmingville, NY 11738
631-320-0440**

Credit Card or ACH Payment Authorization Form

Please Sign, complete and e-mail or fax this form to authorize Farmingville Masonry & Concrete Supply to charge your credit card or bank account for *(Please choose one)*

One time Debit Purchase:

I _____ from _____ authorize
(Full Name) (Company Name)

Farmingville Masonry & Concrete Supply, Inc. to charge my credit card or bank account below in the amount of \$_____.

Blanket Purchase:

I _____ from _____ authorize
(Full Name) (Company Name)

Farmingville Masonry & Concrete Supply, Inc. to keep my credit card or bank account information on file for multiple purchases.

Billing Address _____ Phone# _____
 City, State, Zip _____ Email _____
 SIGNATURE _____ Date _____

I authorize Farmingville Masonry to charge the credit card indicated in this authorization form according to the terms outlined above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company so long as the transaction corresponds to the terms indicated in this form.

Checking/ Savings Account

Credit Card

Checking
 Savings


Name on Account _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State _____



Visa
 Mastercard
 Discover
 American Express

Cardholder Name _____

Account Number _____

Exp. Date _____

Billing Zip Code _____

CVV (3-digit number on back of card) _____

Or Amex (4 digit on front) _____