



This form gives *Top Gunn Equipment Rentals, Inc.*
Authorization to charge my credit card for any and all
Rental expenses and damages.

CUSTOMER NAME _____

CONTRACT NUMBER _____

EMAIL ADDRESS _____

DRIVERS LICENSE # _____ PHONE # _____

TYPE OF CARD (circle one): MC VISA DISC AMEX

COMPANY NAME _____

NAME ON CARD _____

ACCOUNT NUMBER _____

EXPIRATION DATE _____

3-DIGIT SECURITY CODE _____

BILLING ADDRESS OF CARD _____

SIGNATURE OF CARDHOLDER

DATE

**PLEASE ATTACH A COPY OF BOTH SIDES OF YOUR CREDIT CARD
AND A COPY OF YOUR DRIVERS LICENSE.**