

► Credit Card Authorization Form

2587 Wyandotte Street | Mountain View | CA | 94043 | Phone: 650-963-9212 | Fax: 650-963-9206

Date: _____ Invoice Ref. # _____ (optional)

Cardholder Name: _____

Credit Card: Visa Master Card American Express Discover

Card Number: _____

Expiration Date: _____ CVV Number: _____ (3-4 Digit Security Code)



The 3 or 4 digit Security Code (CVV2) can be found on the back of your credit card.



For **American Express**, the Security Code (CID) can be found on the front of the card.

Billing Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Phone Number: _____

I authorize German Motor Specialist to charge my credit card in the amount of:

\$ _____ USD (U.S. Dollars)

Printed Name: _____

Signature: _____ Date: _____

REQUEST FOR LOCK OUT

I voluntarily request to arrange for receipt of my vehicle during non-business hours. Please lock my vehicle outside and place my keys _____.

I acknowledge notice and oral approval of any additional work performed and/or increase in the original estimate price. Additionally I acknowledge and approve all repairs as itemized and/or receipt of vehicle. I also acknowledge receipt of additional consumer warranty and service information contained in the Parts & Service Warranty Disclaimer located on reverse side of my Estimate and/or Invoice. I also acknowledge that German Motor Specialist is not liable against loss occasioned by theft, fire or vandalism while such property remains with the depository and/or receipt of vehicle after business hours.

Signature: _____ Date: _____