



CREDIT CARD AUTHORIZATION FORM FOR PRO ACCOUNT

Corp Office: 250 David Ct. Calverton, NY 11933 Tel 1-877-335-1501 Fax 631-727-6361 Email creditgroup@rbscorp.com

Account Name: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Delivery Address: _____ City: _____ State: _____ Zip: _____
Phone: _____
Cardholder Name: _____
Credit Card Billing Address: _____
Cardholder ZIP Code (From credit card billing statement): _____
Credit Card Number (Last 4 digits only): _____ Expiration Date: _____
Credit Card Type (Check one please): VISA _____ M/C _____ AMEX _____ DISC _____
Email: _____
Would you like to be emailed copies of invoices? YES _____ NO _____

PLEASE PRINT ALL NAMES OF THE PEOPLE AUTHORIZED TO CHARGE ON YOUR ACCOUNT

FOR YOUR SECURITY, PLEASE CALL THE CREDIT DEPT 1-877-335-1501 & GIVE YOUR FULL CREDIT CARD NUMBER

I hereby authorize Riverhead Building Supply Corp. to charge the above listed credit card, and to accept verbal or telephone orders, without my signature, from myself or from any authorized signers on my account for purchase of materials sold by RBSC.

Please check this box to authorize RBSC to load this card to any & all job account(s)

Date: _____ Cardholder Signature: _____

Cardholder Name (Print): _____

A LEGIBLE COPY OF A DRIVER'S LICENSE & A W-9 FORM IS REQUIRED OF ALL ACCOUNT HOLDERS

PLEASE BE ADVISED AT EITHER THE TIME OF UPLOADING YOUR CARD OR CORRECTION OF CC INFO, A PRE- AUTH CHARGE OF \$1.00 WILL TEMPORARILY BE CHARGED/VOIDED TO ENSURE THAT CC BILLING ADDRESS IS CORRECT