



P.O. BOX 767 - 15 Cooper Street
Glens Falls, NY 12801
Phone: 518/793-7788
Fax: 518/793-0602
www.mahneyalarms.com

Mahoney
Notify-Plus Inc.
Alarms

Lake Placid, NY 12946
Phone: 518/523-1600
Fax: 518/793-0602

Plattburgh, NY 12901
Phone: 518/566-9147
Fax: 518/793-0602

CREDIT CARD AUTHORIZATION FORM

Customer Name (I, my) hereby authorize Mahoney Notify-Plus Inc., (COMPANY) to initiate debit entries from the credit card indicated below.

Type of Credit Card: MasterCard VISA Customer Number _____

Name on Credit Card _____

Credit Card Number _____ Expiration Date _____

Security Code (3 digits on back of card) _____ Amount to Debit Credit Card \$ _____

Credit Card Billing Address:

Street Address _____

City _____ State _____ Zip Code _____

E-mail (To Receive Receipt) _____

I agree to have the above credit card setup for recurring debits on the first business day of the month for my recurring monitoring/service agreement billings only. YES NO
(this does not include any customer requested, service call billings.)

This authority is to remain in full force and effect until COMPANY receives written notification from me (or either of us) of its' termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it. I understand a payment cancellation or unsuccessful payment will cause additional fees.

NAME _____ Date _____

SIGNATURE _____ Phone Number _____