



CITATION SUPPORT

6737 Centennial Boulevard
Nashville, Tennessee 37209
Phone.615.298.5252
Fax.615.298.3835
www.citationsupport.com

CREDIT CARD PURCHASE AND PAYMENT AUTHORIZATION

PLEASE PRINT CLEARLY

SECOND LIGHT,LLC dba CITATION SUPPORT. ACCOUNT NAME _____

CARD HOLDERS NAME (as it appears on credit card) _____

BUSINESS NAME(if it appears on card) _____

PHONE NUMBER _____ CELL NUMBER _____

STREET ADDRESS(billing address associated with listed card)

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS(for delivery of receipts) _____

CARD NUMBER _____ EXP. DATE ____/____/____

VISA/MASTERCARD 3 DIGIT CONTROL NUMBER ON BACK or AMEX 4 DIGIT ON FRONT _____

**PLEASE SEND A LEDGIBLE COPY OF THE FRONT AND BACK OF THE ABOVE CREDIT CARD AND
DRIVERS LICENCE OR A GOVERNMENT ISSUED PHOTO ID OF THE SIGNER**

I, _____ OF(company) _____ AUTHORIZE
SECOND LIGHT, LLC dba CITATION SUPPORT, AND ITS SUCCESSORS TO CHARGE THE CREDIT CARD DETAILED
ABOVE FOR ANY RENTAL FEES, SECURITY DEPOSIT, MISSING OR DAMAGED EQUIPMENT FEES, PAST DUE
CHARGES OR ANY FEES OR CHARGES RELATED TO THE PURCHASE, RENTAL, REPAIR, REPLACEMENT OF OR ANY
OTHER SERVICES PROVIDED TO THE ABOVE NAMED CUSTOMER. I HAVE RECEIVED AND AGREE TO SECOND
LIGHT, LLC dba CITATION SUPPORT'S TERMS AND CONDITIONS AND RENTAL AGREEMENT. I ALSO FURTHER
AGREE THAT ANY DISPUTE RELATED TO CREDIT CARD DEBITS SHALL BE GOVERNED BY SECOND LIGHT, LLC dba
CITATION SUPPORT'S TERMS AND CONDITIONS.

CARDHOLDER'S

SIGNATURE _____ DATE _____

NAME(PRINTED) _____ TITLE _____

A 4%CONVIENCE FEE WILL BE CHARGED TO ALL CREDIT CARD AND DEBIT CARD TRANSACTIONS. THIS FEE IS
COLLECTED BY A THIRD PARTY PROCESSOR.