



Phone: 800.803.8093

Email: [sales@gateaccessupplier.com](mailto:sales@gateaccessupplier.com)

**LIMITED CREDIT CARD AUTHORIZATION**

Dear Customer,

Swing Gate Motor, with your authorization, will charge your purchase to a Visa Card, Master Card or Discovery credit card.

If you want to process an order this way, please complete this Authorization Form and fax it to Swing Gate Motor @ 866-586-8533. Please contact us if you have any questions.

Thank you,  
Customer Care Dept.

PO or QUOTE #:

**Authorization To Charge a Purchase**

By Signing below, I authorize Swing Gate Motor / GAS to charge this purchase to my credit card. I understand this is a "custom order" and my card will be charged upon receipt of this purchase order.

Company Name:		Card Type : Circle One <b>American Express</b> <b>Visa</b> <b>MasterCard</b> <b>Discover</b>	
Signature:		Card Number:	
Print Signed Name:		Card Expiration Date:	
Title:		Cardholder: Full Name as appears on card	
<b>Verification Code:</b> We can not process without this! <input type="text"/>		\$ Amount of Purchase:	Purchase Date:
Phone #: (        )        -			
Address <i>where credit card bill goes:</i>			
City:	State:	Zip Code:	

**IS THE ABOVE ADDRESS ALSO YOUR "SHIP TO" ADDRESS?**  Yes  No  
**IF YOU CHECKED NO, PLEASE WRITE YOUR SHIP TO ADDRESS BELOW.**

Street Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

*Please do not write below this line*

Transaction Date:	Transaction Amount :
Card Authorization # :	Entered By :

Form 1106GPG

\* Note - For tracking and shipping info please contact [customercare@gateaccessupplier.com](mailto:customercare@gateaccessupplier.com)