



Box 1677, 1910 South Railway St. E. Swift Current, SK. S9H 4G6  
 Telephone: 306-773-9808 Fax: 306-773-1617  
 E-Mail : rita.mclachlan@deltaaggregates.ca

**CREDIT CARD AUTHORIZATION**

DATE : \_\_\_\_\_

Company Name : \_\_\_\_\_

Contact Name : \_\_\_\_\_

Mailing Address : \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

Phone Number : \_\_\_\_\_ Fax Number : \_\_\_\_\_

Legal Description of where services are required: \_\_\_\_\_  
 \_\_\_\_\_

**CREDIT CARD INFORMATION**

Credit Card Type : VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_

Security Code: \_\_\_\_\_ mm / yr

Is this a one-time Authorization: \_\_\_\_\_

Can this card be kept on file for future use: \_\_\_\_\_

Do you want all your invoices automatically processed on this card: \_\_\_\_\_

*\*\*\* Delta Aggregates is authorized to use my credit card for all products, services, taxes and fees as specified above. All charges will go on CC after 60 days. \*\*\**

\_\_\_\_\_  
 Print Name of Credit Card Holder (as it appears on the card)

\_\_\_\_\_  
 Signature of Credit Card Holder