

Volt Assue EV Rescue Credit Card Payment Authorization Form

Instructions: To pay by credit card, please complete section below.

CREDIT CARD HOLDER INFORMATION

Please check credit card type:

Visa MasterCard Discover American Express

Credit card number: _____ Expiration date : _____ / _____ (mm/yy)

Exact name as it appears on the credit card: _____

Billing Zip Code: _____ Amount to be charged: \$ _____

Primary phone number: _____ Secondary phone number: _____

I, _____, authorize Volt Assure EV Rescue to charge my credit card above for agreed upon purchases. I understand that my information will not be saved to file for future transactions on my account. I also understand and agree that there well be a \$100.00 deposit hold charge for service call. And this charge will be added to the final bill.

Cardholder Signature: _____ Date: _____

LICENSEE/DRIVER INFORMATION

Name as it appears on Driver's License/ID: _____

Licensee's Drivers License / ID number: _____

This credit/debit card payment form will be submitted and supporting documents by:

Volt Assue EV Rescue
1406 Landon Dr
Locust Grove GA 30248

What type of service is this payment for? Roadside Assistance

**** THERE WILL BE A \$100.00 DEPOSIT CHARGED TO THE CARD FOR SERVICE CALL. IT WILL BE ADDED TO THE FINAL BILL.****