

Dispatcher: Tonya Campbell Phone: 813-563-6126 info@dmzlogistics.com

CREDIT CARD PAYMENT AUTHORIZATION FORM

Ι,	, hereinafter called CARRIER do hereby authorize
DMZ Logistics LLC, hereinafter called DISPA	ΓCH, to initiate a debit entry for the amount due
on each invoice for services rendered per signed agreement, to the credit card account	
indicated below, in consideration of the dispatching service provided to me. I understand that	
my signature on this authorization form, along with a photocopy of the front and the back of my	
driver license, will allow me the convenience of not having to produce these items for	
impression at the time of service.	
Name on the Card: Please Circle One: VISA MC DISC AMEX Credit Card Number: Expiration Date: CVN: ZIP: Loads Starting on / 20	
This authorization is to remain in full force an	d effect until the ending date listed above. I
understand that I will be notified via email when dispatch debits my account each week. I	
understand that if the load is tendered and accepted by me, but for any reason, rather due to	
carrier, shipper, or broker, the load gets reschedule or cancelled, I understand I am still	
responsible for paying dispatch as set out above unless agreement is made with	
DMZ Logistics, LLC. Any revocation shall not be effective until dispatch is notified by carrier in	
writing to cancel this automatic payment authorization, in such time and in such a manner as to	
afford dispatch a reasonable opportunity to ac	ct on it.
Card Holders' Signature	
Authorization Date	
Card Holders' E-Mail	