

A1 Rental
2201 Vandiver Dr
Columbia, MO 65202



Phone: (573)474-7368
Fax: (573)474-3948
www.a1toolrent.com

Credit Card Authorization

Name on card: _____

Credit Card Number: _____

Credit Card Expiration Date: ____/____/____

Card Type (Circle): Discover/Visa/Mastercard/American Express

The cardholder hereby authorizes A1 Rental to apply any and all charges to the above referenced credit card account, as it deems necessary. The costs applied to the credit card account are a result of the rental or sale of goods, services, repairs, replacement of equipment or deposit to reserve rental equipment. All deposits to reserve rental equipment are non-refundable. The cardholder accepts any and all charges. All charges are determined solely by A1 Rental.

Cardholder Signature: _____

Telephone Number: (____) _____ - _____ E-mail: _____

Physical Address: _____

(Include Town/Province & Postal Code)

Billing Address: _____

(Include Town/Province & Postal Code)

Drivers License Number: _____

(Include Province)

Print and sign this form. Then fax or e-mail back with a copy of your DRIVERS LICENSE for added verification of your identity.

Signature X _____

Confidentiality Note

This facsimile transmission (including any materials accompanying this transmission) is intended only for the use of the individual to which it is addressed and may contain information that is privileged, secret, confidential, and/or exempt from disclosure under applicable law. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or use of the transmission is strictly prohibited. If you have received this communication in error, it is requested that you notify A1 Rental immediately to arrange for the return of this transmission at no cost to you.