

NORTHEAST WINDOWS USA INC  
1 KEES PLACE  
MERRICK NY 11566  
FAX # 516-868-3577

CREDIT CARD AUTHORIZATION FORM

BUSINESS NAME: \_\_\_\_\_

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

I, \_\_\_\_\_, AUTHORIZE NORTHEAST WINDOWS,  
USA, INC

TO USE MY VISA, MASTERCARD, AMERICAN EXPRESS CREDIT CARD

# : \_\_\_\_\_

EXP DATE \_\_\_\_\_

AND 3 OR 4 DIGIT SECURITY CODE (BACK OF CARD) \_\_\_\_\_

IN THE AMOUNT OF: \_\_\_\_\_

NAME ON CARD : \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

AUTHORIZED  
SIGNATURE: \_\_\_\_\_

\*\*\*\*\*YOU MUST ALSO SUBMIT A COPY OF THE FRONT AND BACK OF  
YOUR CREDIT CARD AND A COPY OF YOUR DRIVERS LICENSE\*\*\*\*\*