



Credit Card Authorization

This form must be filled out for and kept on file before any work orders will be processed by our service department. For Maintenance Plans Monthly billing is available upon request.

I am signing this to authorize Harborside Marina to charge my card as necessary for work I have requested. I am aware that I will be responsible for the charge that will be posted to my credit card. Receipts will be sent out with invoices when completed.

Signed: _____

Print Name: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip: _____

Phone (Day): _____ Phone (Evening): _____

Email: _____ Mobile Phone: _____

Credit Card Type: _____

Credit Card Number: _____

Three or Four Digit Security Code (Master Card/Visa 3 --Amex 4): _____

Expiration Date: _____ Today's Date: _____