

Jacksonville Fax
904-981-3122



Gainesville Fax
352-375-1408

Step 1: General Information (Please Print)

Name _____

Address _____

City _____ State _____ Zip _____ Work Phone _____

Step 2: Payment Information

Card Owner Name as it appears on the Card _____

Card Number _____ Exp. Date _____ Security Code _____

Card Billing Address _____ City _____ State _____ Zip _____

Recurring Billing Authorized? Yes No

Designate Types of Payments under current agreement to be charged:

Authorized Signature _____

Terms and Conditions

The undersigned (*Card Owner*) hereby authorizes **Bernie's Tool & Fastener, Inc.** to charge the full amount of the payments designated above due under its agreement (**or insert more applicable, descriptive language**) with **Bernie's Tool & Fastener, Inc.** to the Visa/MasterCard, Discover or American Express Card (Card) indicated above. Card Owner understands and agrees that it is making these payments according to the provisions of the applicable agreement between it and **Bernie's Tool & Fastener, Inc.** If the Card used for these charges is declined for payment for any reason, the Card Owner understands and agrees that it remains responsible for the full amounts of the payments according to such agreement. Card Owner, understands and agrees that a right to a refund from Visa/MasterCard, Discover or American Express or **Bernie's Tool & Fastener, Inc.** is subject to all provisions of the underlying agreement and to its Card account or Card Owner agreement with Visa/MasterCard, Discover or American Express. Card Owner acknowledges and agrees that the dollar amount of the foregoing payments will appear on its Card billing statement and that it will be obligated to pay that amount to Visa/MasterCard 279190v2 6 in accordance with the terms of its Card account or Cardmember agreement with Visa/MasterCard, Discover or American Express. Cardmember shall attempt to resolve any inquiry or dispute with respect to its payments on the Card with **Bernie's Tool & Fastener, Inc.**

Card Owner's Signature _____ Date _____



4211 Highway Ave Jacksonville, FL 32254
2322 N.E. Waldo Rd. Gainesville, FL 32609