



# SummitAviation

A GREENWICH AEROGROUP COMPANY

## Credit Card Authorization

TO: \_\_\_\_\_ ATTN: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

FROM: Company (Customer's Name) \_\_\_\_\_  
DATE: \_\_\_\_\_  
# of PAGES: \_\_\_\_\_  
Reference (PO #, Sales Order #, Etc.) \_\_\_\_\_

**MESSAGE: Please complete, sign & fax to 336-497-5596 or return via return email**

**I authorize Summit Aviation, Inc. to use my credit card for payment of services stated below and am aware there will be a convenience fee added when credit card payment is processed at \$3,000.00 or above.**

Charge Amount: \$ \_\_\_\_\_ Aircraft: \_\_\_\_\_ Job#: \_\_\_\_\_

Card Type:       VISA             Master Card             Discover             Amex      

Name on Card: \_\_\_\_\_

Contact name & Phone: \_\_\_\_\_

Company name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

Billing City, State, Zip \_\_\_\_\_

CVV # \_\_\_\_\_ CID# \_\_\_\_\_  
(back of all credit cards) (front of AMX card)

Signature: \_\_\_\_\_

Summit Aviation, Inc. will accept this credit card for the amount of the sale noted above, upon approval by the credit card company.

**IF ANY QUESTIONS OR PROBLEMS, PLEASE CALL 336-497-5523 or 336-497-5524**