

Credit Card Authorization Form

Company Name			
Customer Number			
Contact Name			
Address			
City/State/Zip			
Email Address			
Phone		Fax	

In order to process your credit card payment, we will need the following information:

☐ 

☐ 

☐ 

☐ 

Name on Card			
Card Number			
Expiration Date & CVV			
Cardholder billing address			
Amount to be Charged			
Customer Signature		Date	

**RETURN COMPLETED
FORM TO:**

FOR OVERLY INTEROFFICE USE ONLY:

SQDD / Order #		Business / Site	
Overly Employee		Date	

In an effort to better serve our customers and simplify the billing experience, our company offers credit card payments for your convenience. To make a payment via credit card, please complete and sign this form and return via email to Sherry Robertson at skr@overly.com or via mail to Overly Door Company, 351 Harvey Avenue, Suite B, Greensburg, PA 15601

This form authorizes Overly Door Company to charge the credit card listed on this form without any further authorization or notification from the Customer. **The Customer acknowledges that each charge will include a processing fee of 3% of the amount to be charged above.** This processing fee applies only to credit card payments and not to payments made by check, wire or ACH.

If you wish to pay via wire or ACH, please email Sherry at skr@overly.com or via phone at 724-830-2851 for our banking details.