



## Credit Card Auto Pay Authorization Form

I, \_\_\_\_\_, hereby authorize CPD Alaska LLC dba Crowley, dba Anderes Oil dba Taku Oil to process a charge to the credit card referenced below for purchases made on my account. This agreement remains in effect until I revoke this authority in writing.

**Please CHECK the box for the method you prefer below (one box only):**

- Your card will be charged within 24 hours of delivery of fuel and/or services.
- Your card will be charged on or before the 10<sup>th</sup> day of the month for your prior month's deliveries.

I understand that it is my responsibility to notify CPD Alaska, LLC if any information changes regarding the credit card (number change, lost or stolen, expiration date and/or change in credit privileges).

Customer Name (as listed on account): \_\_\_\_\_ Customer Number: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of CARDHOLDER

\_\_\_\_\_  
Email address

Credit Card Billing Address: \_\_\_\_\_  
Street address City State Zip

Home Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

- **Receipts:** Our system will automatically email you when your card is charged. We do not share customer email information with outside companies)
- **Declines:** If for any reason your credit card is declined, we will attempt to contact you by telephone. If we are unable to contact you, you will be notified that the credit card has been declined and your account may be removed from our automatic payment system. If the balance due has not been paid within 10 days of the due date, your account may be subject to finance charges.
- **Update Card Info/Exp Date:** Please contact us at 1-866-770-5587 to update your card information.

Signature of Card Holder \_\_\_\_\_ Date signed \_\_\_\_\_

VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

Credit Card# \_\_\_\_\_ Exp Date : \_\_\_\_\_ / \_\_\_\_\_