

# Credit Card Authority Form

Please fill in this form and return it to us at Black Box Power, PO Box 10044, Auckland 1446.

## 1. Your Account Details

Name/Business Name

Account Number

Residential/Business Address

Telephone Number

Day

Night

Email Address

Mobile

## 2. Credit Card Authority

**Credit card payment details: (Eftpos cards are not accepted)**

Visa  MasterCard

Card Number

Expiry Date

Card Holder's Name

Signature on Card

### Authorisation

I/We authorise you, until further notice in writing, to debit my/our nominated credit card account (hereinafter referred to as "Credit Card Account") with all amounts which the Initiator may debit the Credit Card amount.

I/We acknowledge and accept that the Initiator accepts this Authority upon the conditions below.

I/We acknowledge that a credit card surcharge fee will be charged and added to payments by credit card. The credit card surcharge fee is **1.5%** for Mastercard and Visa.

### CONDITIONS OF THE AUTHORITY TO ACCEPT PAYMENTS BY CREDIT CARD

- The Initiator** has agreed to give written advance notice to the Customer of the net amount(s) to be debited to the Credit Card Account and the due date of the debit to the Credit Card Account at least 10 calendar days (but not more than 2 calendar months) before the date when the debit to the Credit Card Account will be initiated. The advance notice will include a schedule of the date(s) and amount(s) to be debited to the Credit Card Account, together with the following message:

"The schedule below sets out the payment(s) that will be debited to your nominated credit card account on the due date(s) specified, UNLESS YOU INSTRUCT US OTHERWISE BY THE CANCELLATIONS DATE(S) also specified below."

The Cancellation date will be at least two days prior to the due date to allow for amendment of amount(s) to be debited to the Credit Card Account.

- The Customer** may, at any time, terminate this Authority as to future payments by giving written notice of termination to the Initiator.

- The Customer** acknowledges that:-

(a) This Authority will remain in full force and effect in respect of all amounts to be debited to my/our Credit Card Account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Initiator.

(b) In any event, this Authority is subject to any arrangement now or hereafter existing between me/us and the issuer of my/our nominated credit card in relation to my/our Credit Card Account.