



Credit Card Payment Authorization Form

By signing this form, you give Prairieland Disposal Inc. permission to charge your debit/credit card for the amount indicated on or after the indicated date. By completing and signing this form, I acknowledge that the fees, once charged, are **non-refundable**.

I, _____ authorize Prairieland Disposal Inc. to charge my credit/debit card indicated below for:

\$_____ on or after _____.

Cardholder Name: _____

Billing Address: _____

Card Number: _____

Exp. Date: _____ CVV Code: _____

Signature: _____ Date: _____

I authorize the above named business to charge the credit/debit card indicated in this authorization form. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company.

Email form to sales@prairielanddisposal.com or fax (847) 382-5244. No services will be rendered until completed form is returned.