



CREDIT CARD AUTHORIZATION



CREDIT CARD HOLDER INFORMATION				
NAME ON CREDIT CARD				
TYPE OF CREDIT CARD	VISA	MC	AMEX	DISCOVER OTHER
TYPE OF ACCOUNT	PERSONAL		BUSINESS	
COMPANY NAME				

CREDIT CARD NUMBER			CCV2 CODE		
EXPIRATION DATE					
BILLING ADDRESS					
CITY		PROVINCE		POSTAL CODE	
PHONE		EMAIL		FAX NUMBER	

AUTHORIZED TRANSACTION INFORMATION	
COMPANY	ADESA Auctions Canada Corporation o/a ADESA Richmond
ADDRESS	16179 Blundell Road, Richmond, BC, V6W 0A3
PHONE NUMBER	(604) 233-7333
TYPE OF CHARGE (1)	
TYPE OF CHARGE (2)	
AUTHORIZED AMOUNT (1 + 2)	
DATES OF CHARGES	

AUTHORIZATION OF CARD USE
<p>I certify that I am the authorized holder and signer of the credit card referenced above.</p> <p>I certify that all information above is complete and accurate.</p> <p>I hereby authorize collection of payment for all charges as indicated by the Authorized Company. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. I understand this authorization is only for up to this amount during the time period of "DATES OF CHARGES" referenced above. If additional charges are going to be authorized, a new form will have to be completed.</p>

CARDHOLDER NAME			
SIGNATURE		DATE	

Please fax your completed form to 604-238-7007