Bimini Shipping .com

Commitment · Service · Community

Credit Card Authorization Form

PLEASE CHARGE MY CREDIT CARD FOR $_____

CARDHOLDER NAME (As it appears on the card) _____

CARDHOLDER ADDRESS _____
(Card Mailing Address)

CARDHOLDER PHONE NUMBER _____

CARD TYPE

_____ MASTERCARD _____ VISA

CREDIT CARD No. _____

EXPIRATION DATE _____ CARD VERIFICATION CODE _____
MO/YR

X _____
SIGNATURE DATE

BILL OF LADING(S)/DOCK RECEIPT NUMBER: _____

I, hereby authorize Bimini Shipping, LLC to charge my credit card for fees and/or services for work performed. I also agree to pay an additional 3% administration fee that will be added to the total. Should I have any questions or concerns with this credit card charge made to my account, I will make every attempt to resolve the issue(s) directly with Bimini Shipping, LLC. By signing the above, I acknowledge that I am an authorized signatory for the above-referenced credit card.

☐ This serves as my authorization to utilize the above credit card for all future charges related to my account. I will provide written notification shall I wish to discontinue this automatic billing procedure.

Please fax completed form to 305-634-8859
Attention: Susie Valdes

You must also have the front of Credit Card faxed along with a copy of a valid identification. Note you must have this form filled out and signed for each credit card transaction unless the above option is selected.

Bimini Shipping, LLC | 3301 NW South River Drive, Miami, FL 33142
T. (305) 634.8858 | F. (305) 634.8859 | **www.BiminiShipping.com**