Oakley Relocation™
An Interstate Agent for North American Van Lines U.S. DOT 070851
P.O. Box 80008, San Diego, CA 92138 1-800-537-4812 Fax 858-486-6023
P.U.C. # T190480
www.oakleyrelocation.com

Credit Card Authorization

Thank you for choosing Oakley Relocation for your relocation. We appreciate the opportunity to provide you with our services. Please take a moment to complete this form for our records and return it to us.

Customer's Name _____ Reg. Number _____

I, _____ (Cardholder's Name), authorize payment of moving expenses from _____ (origin)

to _____ (destination) in the amount of _____ to be charged to my _____ (Type of Credit Card)

_____ (Credit Card Number) CVV _____ Exp. Date _____

(This does not include a shuttle, S.I.T. charges, third party services at destination; if applicable)

_____ (Cardholder's Signature) Date _____

_____ (Billing Address for Credit Card) _____ (Address @ destination)

_____ (City, State, Zip) _____ (City, State, Zip)

_____ (Phone# @ origin) _____ (Phone# @ destination)

NOTE: We will **NOT** receive a credit card at the completion or on the day of packing and/or loading; it must be received 72 hours prior to your move.

Automatic Credit Card Authorization for Storage Charges

Please charge my MasterCard, Visa, or Discover card for my monthly storage charges.

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ (Account Number) ☐☐☐☐ (Expiration Date) ☐☐☐ (CVV, last 3 digits on the signature panel)

Debit Amount $_____dollars on the first of each month for term of storage at Atlas Transfer and Storage Company.

Name on card_____

This authority is to remain in full force and effect until Oakley Relocation™ has received written notification from me 30 days prior to my shipment released from storage. (Storage is not prorated.) If my charge is declined, I shall be charged a $20.00 return fee.

I have read, understand, and agree with the terms of this form.

Cardholder's Signature _____ Date _____

Please Print

Billing Address _____

City_____ State _____ Zip _____ Contact Phone# _____