

ALU Inc.
Credit Card Authorization Form

A L U

240 Anderson Avenue
Moonachie, NJ 07074
Tel: 201.617.2000
Fax: 201.617.2001
www.alu.com

Customer to fill out:

I, _____ (print name), of _____ (Company name)
holder/owner of the following credit card, hereby authorize the use of the credit card
for the purchase from ALU Inc. for purchase. Order/Quote # _____.

Please check and initial to accept shipping charges. All shipping charges are determined
at time of shipment. Type of Business _____ Initial _____

☐ Overnight ☐ 2 Day ☐ 3 Day ☐ Ground Service

Billing Information (for card):

Name:	
Street:	
City, State, Zip:	
Telephone #:	Email:

Credit Card Info:

Name (as it appear on card):															
Select type of card:	<input type="radio"/> American Express <input type="radio"/> Visa <input type="radio"/> Mastercard														
Credit Card Number:															
Exp. Date					**Security Code										

***** For Amex – this is the 4-digit code found on the front of your card on the right hand side. For Visa & MasterCard – this the 3-digit code found on the back of your card in the signature panel.***

*By signing this agreement, I acknowledge the charges described per above quote/order and
assume full responsibility for said charges and agree to honor and abide by the terms stated on
above referenced quote/order.*

Authorized Signature:	Date:
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****Please note all credit card transactions will incur a 3% credit card processing fee!****