



PHONE: 818-997-0512

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**CREDIT CARD TRANSACTION FORM
AUTHORIZATION TO CHARGE CREDIT CARD
(NOT FOR USE FOR RENTALS OR EXCHANGES/CORE UNITS)**

TERMS AND CONDITIONS

The attached authorization form must be filled out completely and signed on pages 1 and 2. Both pages must be submitted.

A SCANNED OR PHOTO COPY OF BOTH SIDES OF THE SIGNED CREDIT CARD MUST BE PROVIDED.

I authorize CAPS Aviation, a Corporate Air Parts, Inc. company, to charge my credit card for payment of equipment, parts and/or services purchased. This authorization is not to be used for Exchanges/Core Units or Equipment Rental. A separate form must be completed for those transactions. If CAPS Aviation is unable to process my payment, I will be responsible for an alternate payment arrangement and any resulting processing fees before any goods are released.

I certify by my signature on page 2, I am the authorized user on the card as listed on this form and have authorized CAPS Aviation to process payment as designated.

I understand that the charge reflected on my Credit Card Statement will be in the name of **"CAPS Aviation, Van Nuys, California"**.

I have read and understand the credit card terms and conditions as outline above.

NAME OF CARDHOLDER

AUTHORIZED SIGNATURE

DATE

**CAPS AVIATION AUTHORIZATION TO PROCESS STANDARD CREDIT CARD TRANSACTION
(NOT FOR RENTALS OR CORES)**

Company/Purchaser Name: _____

Type of Credit Card: AMEX VISA MASTER CARD

Cardholder's Name: _____

Card #: ____/____/____/____

Expiration Date: _____ Security Code: _____

Billing Address: _____

City _____ State _____ Zip _____

Phone: _____ Fax: _____

Aircraft Tail: _____ Aircraft S/N: _____

One-time use:

I hereby authorize Corporate Air Parts, Inc. dba Caps Aviation to charge the above credit card as invoiced. This is a one-time charge authorization and not an authorization for recurring billing. I understand that if I want Corporate Air Parts, Inc. dba CAPS Aviation to charge additional balances to my credit card in the future, I will need to submit an authorization form for each purchase.

Invoice / PO _____

Initial Here

Recurring Billing:

I hereby authorize Corporate Air Parts, Inc. dba CAPS Aviation to charge the above credit card on a recurring basis for all future transactions as billed by Corporate Air Parts, Inc. dba CAPS Aviation. This recurring payment authorization shall remain in force until cancelled by me in writing.

Initial Here

Cardholder Signature:

Date:

By signing this authorization, I acknowledge that I have read all terms and conditions, agree as the authorized cardholder to all charges as designated, and further warrant all information provided is accurate.