



Mountain View Staging  
545 West 1300 North  
Springville, UT 84663  
801-489-7302

## One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize Mountain View Staging Services to make a one-time charge to your credit card listed below.

By signing this form, you are granting Mountain View Staging to charge your account for the amount indicated on or after the indicated date. **An additional fee of 3% is added to your amount for the use of a credit card.** This is permission for a single transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

### Please complete the information below:

I, \_\_\_\_\_, authorize Mountain View Staging to  
(full name)  
charge my credit card for the total amount calculated below on or after \_\_\_\_\_  
(date)

Description of goods/services: \_\_\_\_\_

The total amount due = \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Billing Address for/on Credit Card: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Email Address: \_\_\_\_\_

Account Type:	Visa	MasterCard	AMEX	Discover
Name of Cardholder:	_____			
Account Number:	_____			
Expiration Date:	_____			
CVV2 (3 digit # on back of Visa/MC/Disc., 4 digit # on front of AMEX):	_____			

Signature \_\_\_\_\_ Date \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am the authorized user of this credit card and I will not dispute the payment with my credit card company, so long as the transaction corresponds o the terms indicated in this form.

Please return this completed form to: [accounting@mvstaging.com](mailto:accounting@mvstaging.com)  
If you have any questions, please call Accounting at (801) 489-7302