



Motor
Vehicle Sales Authority
 of British Columbia

Previously known as the Motor Dealer Council of BC

Credit Card Authorization Form

PLEASE PRINT AND ENTER ALL INFORMATION AS IT APPEARS ON THE CARD:

Name(s) (as it appears on the card): _____

Card Type (check one): Visa Master Card

Card #: _____ Expiry Date _____ / _____

I (we) authorize The Motor Vehicle Sales Authority of British Columbia to charge \$ _____ to the above Credit Card.

I (we) understand that a written notice must be received by The Motor Vehicle Sales Authority to terminate this agreement.

I (we) warrant that all persons whose signatures are requested to sign on this account have signed and received a copy of this agreement.

Date: _____ Signature: _____

Print Name: _____

Date: _____ Signature: _____

Print Name: _____

Please fax or mail this completed form to: **Motor Vehicle Sales Authority of British Columbia.**