

## CREDIT CARD AUTHORIZATION: SECURITY DEPOSIT

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

Card Holder Name: \_\_\_\_\_

CC#: \_\_\_\_\_ Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

MASTER CARD  VISA  AMEX  DISCOVER  OTHER: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ ext. \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

E-mail: \_\_\_\_\_

**SINGLE USE AGREEMENT**

Order ID: \_\_\_\_\_ Deposit amount: \$ \_\_\_\_\_

**BLANKET AGREEMENT**

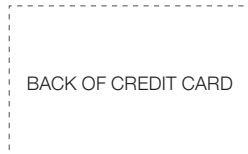
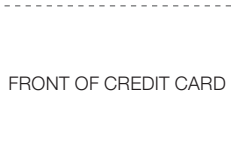
By selecting Blanket Agreement, I agree and authorize that the credit card I have provided will be used to secure the deposit for the present and future motion picture equipment rentals.

Deposit amount: \$ \_\_\_\_\_

By signing this agreement, I authorize T-stop, Inc. to use my credit card to secure the deposit for the purpose of renting motion picture equipment. This deposit is to be held until all rental equipment has been returned in satisfactory condition and inspected by T-stop. I hereby authorize T-stop to charge my credit card for any loss and damages incurred; the amount charged will not exceed the above mentioned deposit amount.

I have read the T-stop Terms And Conditions. I understand that I will be held fully responsible for the above charges.

**PLEASE FAX COMPLETED FORM WITH A COPY OF YOUR GOVERNMENT ISSUED PHOTO I.D. AND CREDIT CARD TO (323) 544-4970 OR EMAIL TO info@t-stopinc.com**



\*Note: If the bank card is a CORPORATE CARD, please include a note on your company letterhead authorizing use of the card, and signed by the same person signing this form.

If the bank card is a PERSONAL CARD, driver's license or passport must indicate the same name as the cardholder.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date