General Freight, Warehousing, Storage & Distribution
A Carrier You Can Depend On!

RECURRING CREDIT CARD PAYMENT AUTHORIZATION

CUSTOMER INFORMATION

Company Name	**Contact**
Attn	**Phone**	**Fax:**
Email	**Date**
Billing Address	

CREDIT CARD INFORMATION

Card Type: ☐ **Visa**   ☐ **American Express**   ☐ **Master Card**   ☐ **Discover**

Card Number	**Expiration Date: (mm/yy)**	**CVV #**

Cardholder Name: (as shown on card)

Cardholder's Billing Address	**City**	**State**	**Zip**

We/Customer authorize Non Stop Transportation Inc. to charge all and any future charges to the credit card above. We/Customer understand that it's our responsibility to review our invoices and dispute them in writing within 5 days of the credit card transaction date. We/Customer understand that our information will be saved for future transactions. We/Customer agree that no prior-notification will be provided to us unless the date or amount changes, in which case we will receive a notice from Non Stop Transportation Inc. at least 5 days prior to the payment being collected.

We/Customer authorize regularly scheduled charges to our credit card. We/Customer will be charged the amount indicated in each invoice billed or indicated on bill of lading for each particular shipment. The receipt for each payment will be provided to the Customer and the charges will appear on the Customers credit card statement. Terms are Net-15.

We/Customer understand that this authorization will remain in effect until we cancel it in writing, and we agree to notify Non Stop Transportation Inc. in writing of any changes in our account information or termination of this authorization at least 15 days prior to the next billing date. If the noted payment dates fall on a weekend or a holiday, I understand that the payments may be executed on the next business day. I acknowledge that the origination of Credit Card transactions to our account must comply with the provisions of U.S. law. I certify that I am an authorized user of this Credit Card and will not dispute these scheduled transactions, so long as the transactions correspond to the terms indicated in this authorization form.

By signing below, you are agreeing to the terms and conditions as stated above.

Authorized Cardholder Signature	**Date**

Thank you for choosing Non Stop Transportation Inc. Our company's goal is to provide the best service to our customers.

INVOICE TRANSACTIONS		
Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
Auth#	Trans#	Initial
Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
Auth#	Trans#	Initial
Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
Auth#	Trans#	Initial
Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
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Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
Auth#	Trans#	Initial
Invoice #	Amount $	Invoice Date
Terms	Invoice Due Date	Today's Date
Auth#	Trans#	Initial

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PAYMENTS		
Amount $	Date	Initial
Auth#	Trans#	
Amount $	Date	Initial
Auth#	Trans#	
Amount $	Date	Initial
Auth#	Trans#	
Amount $	Date	Initial
Auth#	Trans#	
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