



**MANOR
FUEL CO., INC.**

AUTHORIZATION TO DEBIT CREDIT CARD ACCOUNT

Customer Name: _____ Account #: _____

Please print form: (All data must be completed correctly and verified before we can process an order)

Print Cardholder Name: _____

Signature of Cardholder: _____

PLEASE SIGN YOUR NAME AS IT APPEARS ON YOUR CREDIT CARD

Credit Card Statement Billing Address: _____

Phone Number (Billing Address) _____

() _____

CREDIT CARD INFORMATION

_____ / / _____
Credit Card Account # Expiration Date

Require 3-digit security code on back of credit card

CVV2 Security Code (MC, Visa, Discover) _____

Bank Issuing Credit Card: _____

E-mail Address _____ (Receipt will be e-mailed when payment submitted)

MasterCard Visa Discover

I (we) hereby authorize: Manor Fuel Co., Inc. to charge my credit card account indicated above. Note: The budget plan payment will be charged monthly on the 5th day of each month. I understand that I must give 15 days written notice before the next bill cycle to Manor Fuel Co., Inc. to stop reoccurring billing on my credit card.

Visit our website @ www.manorfuel.com

QUALITY SERVICE SINCE 1925
Fuel Oil • Heating • Central Air Conditioning

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