



MEGA CRANES LTD.

CREDIT CARD AUTHORIZATION FORM

Recurring and Subsequent Sale Charges by Credit Card Payments

Name on Credit Card (Holder's Name) Alex Collins
Business Name Grease Ducks Ltd.
Billing Address (Credit Card) 200 - 100 Park Royal, West Vancouver BC V7T 1A2

The undersigned Customer hereby authorizes Mega Cranes Ltd. (hereinafter referred to as "Mega Cranes") to obtain payment of invoices for recurring services from the Customer's credit card account identified below. Mega Cranes may charge the account from time to time, as per the Customer's agreement with Mega Cranes including all re-occurring use of equipment, services, hours, and travel since the preceding payment, without requirement of the Customer's signature for each payment.

Credit Card Number: 4520 7070 0009 0772

Credit Card Type: (please circle one) Vis ☒ MasterCard Dollar Amount: \$ 439.62
As per company standard procedure 3% Surcharge: —
Total: \$ 439.62

CVV Number: (3 digits on the back of card): 282 Expiration Date (Month/Year): 04/20

By signing this form, the Customer acknowledges and agrees as follows:

- ❖ This signed form is confidential and will be kept on file at Mega Cranes Ltd.'s office.
- ❖ Credit Card payments will appear on your statement as Mega Cranes Ltd.
- ❖ The Customer will first attempt to rectify disputed charges directly with Mega Cranes Ltd. in writing via registered mail.
- ❖ If the Customer fails to dispute a charge within thirty (30) days from the time the credit card is charged, the Customer hereby agrees that the charges are valid and agrees not to dispute said charges.
- ❖ The Customer authorizes Mega Cranes Ltd., to automatically charge their above-referenced credit card.
- ❖ The Customer certifies, warrants and represents that the cardholder named above agrees to pay the credit charge(s) in accordance with the agreement described above.
- ❖ This authorization will remain valid until revoked in writing with thirty (30) days prior written notice of revocation.

Cardholder will pay total amount shown to card issuer according to cardholder agreement with card issuer.


Cardholder's Signature
Alex Collins
Printed Name

July 29, 2017
Date

Please fax completed form to 604-599-5250

MC# 140438
MC 140441