



1022 - 1028 Skipper Road Tampa, FL 33613
Phone: (813) 971-9990 | **Fax:** (813) 971-3940
Email: ap@rentalex.com

TO: _____ FROM: _____
FAX #: _____ DATE: _____

CREDIT CARD AUTHORIZATION

PLEASE FAX A COPY OF YOUR DRIVERS LICENSE WITH THIS FORM!

Name as it appears on card: _____

Card Number: _____

Expiration Date: _____ Card Type: (check one) ☐ Visa ☐ MasterCard ☐ Am-Ex

CCV#: _____ (3 digit code on back of card)

Credit card billing address: _____

City: _____ State: _____ Zip Code: _____



By signing my name below, I confirm that I am authorized to use the credit card identified above. Furthermore, I authorize the use of the above credit card to Rentalex as a means of collecting payment for charges incurred involving rental equipment (i.e. fuel, damage waivers, delivery/pick-up charges, repairs, damages, etc.)

Signature: _____

Date & Time: _____