



Payment Authorization Form

OUR PAYMENT POLICY IS DESIGNED TO SAVE MONEY AND TIME FOR ALL

Prepaid monthly services, such as hosting or email, require payment at the beginning of each billing cycle and are charged to the credit card on file. Service work must be paid for at the time of completion, and credit card information is required even if paying by check. If a check is not received within three days after an invoice's due date, the credit card on file will be charged. If a check is received after the credit card payment is processed, the check will be returned.

After work completion, a detailed invoice of each completed task will be produced and paid using the credit card on file. The invoice will also note the initials of the person who performed the work. Prepaid deposits or credits will be applied to outstanding invoices. Once a prepaid deposit is used, the customer will be billed the balance going forward, and the credit card on file will be charged. Payment terms are not possible since our vendors are set up for immediate payment. Keeping a credit card on file is the most effective way to avoid any collection costs. Customers can issue a check at the time of service, and any Click IT service technician can accept any form of payment using their smartphone. If a billed item is disputed, Click IT must receive notification of the dispute within two days of invoice receipt. Otherwise, the invoice is considered valid. To dispute charges on any invoice received, please contact the accounting department. Notifications of charges will be sent to the email or physical address on file as provided on this form. It is the customer's responsibility to know and understand this policy and update their contact information with us when and if changed. All orders are subject to the terms and conditions published at <https://clickitgroup.com/legal>, and Click IT reserves the right to cancel any service for any reason it deems appropriate. Cancellations of this Authorization Agreement must be received at least 2 weeks prior to the expected billing date.

Please complete the form below:

By signing this statement, I confirm that I have read and agree to Click IT's billing policy, as well as its PCI compliance regulations, and authorize the company to charge the credit card listed as described in the policy. For monthly services or overdue bills, I approve the use of the credit card on file to pay my invoices during the week of the invoice date. I also agree to pay any credit card processing fees and to make purchases in accordance with the cardholder agreement of the issuing bank. Furthermore, I understand that my card details will be stored securely in my profile and will only be used for approved purchases.

Signature: _____ Date: _____ Email: _____

Credit Card Type: Mastercard Visa American Express Discover

Card Number: _____ Expiration Date: _____ Security # _____

Your Name: _____ Title: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Please note that Click IT follows PCI compliance rules to ensure the security of your credit card information. Any electronically stored credit card information is securely encrypted. All orders are subject to Click IT's Acceptable Use Policy, Privacy Statement, and additional Terms and Conditions, including PCI compliance, as found at <https://clickitgroup.com/legal>.

Check if you seek approval to pay invoices by check. (Three trade references and bank approval required. Please attached.)

Please indicate how you would like to receive invoices by Mail Email, or Both

Additional comments or instructions:
