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ACCOUNT REQUEST AND CREDIT CARD AUTHORIZATION FORM

Business Name

Owner Name

Billing Address

Street

City State Zip

Phone Fax

Cell

Email

Payment terms are NET 30 for all account customers. If payment is not made within 30 days you authorize Magic Plumbing to charge the credit card below. All new accounts must pay COD for the first service invoice.

Card Type Visa Master Card Discover Amex

Card Number Expiration Date

CCV 3 Digit Number on Rear

AMEX 4 Digit Number on Front

Name on Card

Credit Card Billing Address

Street

City State Zip

Automatic Payment

Amount Interval

Authorization

I authorize Magic Plumbing to charge the above credit card for all invoices over 30 days old since the service was rendered. I understand that the first charge will include the balance already due.

Cardholder Signature Date