SECTION 6 – CREDIT CARD DEDUCTION AUTHORITY

Customer's Authority	I/We _____ ABN _____ Name/Company Name (if applicable) authorise Majors Group Australasia (**Majors Group**) to arrange for funds to be debited from my/our credit card in accordance with this Authority.
Payment Options	I/We request that you debit my/our credit card in accordance with this Authority, for services provided by Majors Group. The services provided by Majors Group which are covered by this Authority are limited to service call outs, service technician hourly rates and travel costs to conduct services requested by myself/us. I/We acknowledge that we will be required to provide our prior written consent to Majors Group for each instance where a debit will be made.
Authorisation	I/We understand and acknowledge that: 1. it is my/our responsibility to ensure that clear funds are available for the debit of any amount authorised pursuant to this Authority; 2. any debit which is dishonoured will be reversed and a dishonour fee will be charged to me/us; 3. nothing in this Authority is intended to alter Majors Group's Sale and Purchase Terms & Conditions; 4. my/our credit card details will be retained on file by Majors Group until such time as I/we advise Majors Group otherwise in writing. Signature _____ Date _____/_____/_____ Signature _____ Date _____/_____/_____

PRIVACY STATEMENT

Please note that personal details requested on this Authority will be used for the sole purpose of processing this Authority, and any future debits authorized by the customer. The provision of this information by you is voluntary, however if you are unable to provide this information or you do not wish to provide this information, Majors Group will be unable to maintain this Authority on file. To validate your card we place a $ 1 pre authorization on your card,this is not a charge to your card. It will be released by your financial institution usually within 7 days . Authorization provision Majors Group's Privacy Policy is available on its website at http://www.majorsgroup.com.au.

Account Details	☐ **MASTER CARD** ☐ **VISA CARD** ☐ **AMEX** CVV:_____
	Card Number: ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___
	Expiry Date: ___ ___ / ___ ___ **Cardholder's Name:** _____
	Signature: _____ **Signature:** _____