



3430 SUNRISE BLVD  
RANCHO CORDOVA CA 95742  
PH: 916-635-2514 / FAX: 916-415-5040

### CREDIT CARD AUTHORIZATION LETTER

I, \_\_\_\_\_ (PRINT NAME AS APPEARS ON CARD)

AUTHORIZE **HAPPY AUTO PARTS INC**, TO CHARGE MY CREDIT CARD FOR THE FOLLOWING TRANSACTION:

PART DESCRIPTION: \_\_\_\_\_

YEAR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

CREDIT CARD TYPE: VISA    MASTER CARD    AMERICAN EXPRESS    (CIRCLE ONE)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ 3 OR 4 (AM EXPRESS FRONT) DIGIT V-CODE: \_\_\_\_\_

NAME OF THE CARD HOLDER: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

SALE AMOUNT: \$ \_\_\_\_\_

TAX: \$ \_\_\_\_\_ 8% = (CA ONLY)

CALIFORNIA SELLER PERMIT #: \_\_\_\_\_ PLEASE FAX A COPY OF RESALE PERMIT

SHIP / DELIVERY: \$ \_\_\_\_\_ **TOTAL: \$** \_\_\_\_\_

SHIP / DELIVERY ADDRESS: (IF DIFFERENT THEN BILLING ADDRESS)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY : \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ ASK FOR: \_\_\_\_\_

PLEASE FAX A COPY OF DRIVER LICENSE OR ID OF CARD HOLDER

[www.HappyAutoShop.com](http://www.HappyAutoShop.com)