EXPRESS AUTO PARTS

8225 Airline Dr. Houston, TX 77037 · 281-405-8888 · expressautopartstx@gmail.com

HOW TO COMPLETE YOUR PAYMENT AUTHORIZATION FORM

Choose ONE of the two options below.

OPTION 1: PRINT IT

1. **Print** the form.
2. **Fill it out** by hand and **sign** it.
3. **Scan it**, or take a clear photo of the whole page with your phone.
4. **Email** the scan or photo to **expressautopartstx@gmail.com**.

OPTION 2: FILL IT OUT ON YOUR PHONE OR COMPUTER

1. **Save** the form to your phone or computer. Do not fill it out inside the email.
2. **Open** the saved form in a form-filling app. We recommend the free **Adobe Acrobat Reader** app.
3. **Fill it out** by tapping or clicking each line and typing.
4. **Save** the file.
5. **Email** the saved file to **expressautopartstx@gmail.com**.

IMPORTANT: With your form, also email a photo of the **front and back of your credit card** and your **driver's license**.

Questions? Call 281-405-8888 or email expressautopartstx@gmail.com.

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ONE (1) TIME CREDIT CARD PAYMENT AUTHORIZATION FORM

PLEASE EMAIL A COPY OF THE CREDIT CARD FRONT & BACK AND DRIVER'S LICENSE

Date: _____ Driver's License #: _____

State: _____ Date of Birth: _____

Cardholder Name: _____ Work/Home Phone: _____

Credit Card Billing and Shipping Address MUST BE THE SAME!!!
Otherwise, payment must be made by Zelle.

Credit Card #: _____ Card Type: ☐ VISA ☐ MC ☐ AMEX ☐ DISCOVER

Exp. Date: _____ CVV2: _____

A 4% service fee will be added to payments made by any credit card.

Billing Address / Shipping Address (MUST BE THE SAME): **Attn:** _____

_____ **Phone:** _____

_____ **Other Notes:** _____

I hereby authorize EXPRESS AUTO PARTS to charge the order described in this document to my CREDIT CARD, as noted above. I understand that this order is placed VIA TELEPHONE and my signature on this agreement is binding. This purchase is for used parts, Freight on Board (FOB) part description: _____. I understand that if for any reason I REFUSE this shipment, the FREIGHT CHARGES will be charged to my credit card. I understand that any TAMPERING, DISASSEMBLY, OR MODIFICATION to the part(s) without written authorization from the seller will VOID ALL WARRANTIES. All parts returned complete as shipped are subject to a MINIMUM OF A %20 RESTOCKING FEE. Returns are not accepted without a Return Merchandise Authorization (RMA); to request an RMA please email **expressautopartstx@gmail.com** or contact your salesperson. We reserve the right to arrange all returns.

DETAIL OF CHARGES

Part(s) Charge: _____

Misc. Charge: _____

Freight Charge: _____

Total Purchase Charge: _____

CARD HOLDER SIGNATURE

_____

Printed Name: _____

Date: _____

Salesperson: _____

ZELLE PAYMENT

expressautopartstx@gmail.com

Scan the QR code
in your banking app