



Pacific Backlot Services
3500 Cornett Road Bldg. X
Vancouver, BC V5M 2H5
Ph: 604-453-5070
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**PACIFIC BACKLOT SERVICES LTD.
CREDIT CARD BILLING AUTHORIZATION FORM**

Credit Card Type:		
Cardholder Name:		Phone:
Card Number:		
Expiration date:		CVC Number:
Billing address (as it appears on your statement):		
City:	Province:	Postal Code:
Production:		
Rentalworks Quote/Order Number:		
<input type="checkbox"/> I would like to give authorization to PBS to keep above information on file for future orders.		

I, _____, the undersigned cardholder, authorize **Pacific Backlot Services Ltd.** ("PBS") to charge the above noted credit card in the event of any lost or damaged equipment related to the above noted order number.

On return of the rented equipment to PBS and on execution of the return contract by a representative of the production, it is the responsibility of the production to clarify the status of the order with PBS. It is acknowledged that PBS has 5 days to process the returned equipment to determine if there are any damages that will need to be charged to the credit card. On determination of damages to the returned equipment PBS will notify the production by phone or email prior to processing the credit card charge.

If there is a disagreement between PBS and the production on the damages PBS has the right to refer production to the terms and conditions of the signed rental agreement. In the event of lost or missing equipment that is thought to be in possession of the production, PBS will allow a 3 day grace period to return lost equipment. If the lost equipment is not returned in 3 days PBS will charge the replacement cost of the lost equipment to the credit card. In the event the lost equipment is returned after the 3 day grace period PBS will credit the replacement cost of the lost equipment to the credit card, less the equipment rental rates for the length of time the equipment was lost.

I certify that I am the authorized cardholder of record and that I have full authority to charge purchases on behalf of the account listed above and guarantee payment of such charge.

Card holder Signature

Date

Print Name