

Credit Card Payment Pre-Authorization Form

Parsun Marine. Address: 120-11791 Machrina Way, Richmond, BC, Canada V7A4V3
Toll Free: 1-888-5732629 Fax: 604-277-3360 support@parsunoutboard.com

Complete and sign this form to authorize Parsun Service Center in Canada (Pay to: Seamax Marine) to make charges to your credit card listed below to cover the shipping, repair or replacement cost which are not covered by the product limited warranty.

I, _____ (Buyer's Full Name) understand the Parsun Limited Warranty coverage and this Return Service Guideline. I authorize Parsun Service Center (Seamax Marine) to charge my credit card for Parsun motor return shipping fee plus parts and service repair cost if the motor damage is not covered by the limited warranty.

Customer Initial: _____

You Credit Card Information

Name: _____ Phone / Fax # _____

Billing Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____

Shipping Material Cost & Return Shipping Cost: _____ (Pre-paid Amount: _____)

Motor Max Repair Cost or if Damage NOT Covered by Warranty: _____

Motor Replacement Cost if Damage NOT Covered by Warranty: (NEW) _____ (USED) _____

Account Type: Visa MasterCard **Card Currency:** _____

Credit Card Number : _____

Expiry Date: _____ CVV Digit: _____

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

NOTE: All charges made from above credit card will notice the customer and confirm the amount ahead. We will NOT put any charges on your credit card without your confirmation.