

Lost&Found (Impromptu) Credit Card Application

Business Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone number: _____ Fax Number: _____

Email Address: _____

Years at this address: _____ YRS _____ MONTHS

Forms of Ownership (please check one):

Corporation Incorporation Partnership Individual Limited Liability Corp.

Name of Owner or Principal: _____

Home address: _____

Federal Identification Number: _____

I, _____ hereby authorize Hotel Humidor Co., LLC (Impromptu Imports) to charge my:

(Circle One)

MC / VISA / DISCOVER / AMEX

Business Name on Account: _____

Credit Card Number: _____ Exp Date: _____

CV CODE: _____ Cardholder Name: _____

Cardholder Billing Address (Required): _____

(Initial)

_____ I AGREE TO PAY AUTHORIZED AMOUNT (PER INVOICED ORDER). CHARGES WILL BE PROCESSED PRIOR TO SHIPMENT OF ORDER.

_____ I AGREE TO ALLOW THE HOTEL HUMIDOR CO.,LLC TO KEEP RECORD OF THE CREDIT CARD LISTED ABOVE FOR FUTURE ORDERS.

I UNDERSTAND THAT MY SIGNATURE ON THIS CONTRACT WILL SERVE AS MY AUTHORIZED SIGNATURE ON THE CREDIT CARD SLIP(S) FOR PROCESSING AND SALE OF PRODUCT.

NAME (PLEASE PRINT)

Date

Signature Signature (joint)

If paying with check, make all checks payable to "Impromptu Imports".
*Copy of Tobacco License and Resale Certificate required to process this application.