



*International Road Dynamics and
NC Pass
Authorization to charge Credit card*



Date: _____

Customer Name: _____

Carrier Name: _____

Method of payment (Check one only please):

VISA

Mastercard

Card #: _____

Expiry date: _____

3 digit security code on back of card: _____

Name on card: _____

Amount to be charged: _____

Customer signature: _____

For office use only

Customer ID:

Invoice or Sales Order #:

Date payment received at Head Office: