



Fluid Draining Technology

CREDIT CARD BACKUP FORM

In continuing efforts to improve our accounts receivables, No-Spill Systems will now require a credit card (Visa/MasterCard/American Express/Discover) to be stored on file as a primary and/or back-up for payment purposes.

Our normal payment terms are due Net 30 days, payable by check, credit card or electronic funds transfer. However, due to an increasing customer base as well as those not adhering to the original payment terms, we will now require a credit card on file.

If approved, or if you have previously been approved for credit, your credit card will only be charged in full if we have not received payment within 60 days from the original invoice date.

If there is an overlap between when you have sent your check and No-Spill Systems charging your credit card, your check will be promptly sent back to your accounts payables department.

In order to proceed with your next order, this information will be required before processing.

Please fill out your credit card information in full (be sure to include name, number and expiration date)

Credit Card # _____ Exp date: _____ / _____
(month/year)

Name on Card: _____

Security code (CSC/CVV): _____

Fax or email to, Mailyne Vandal, mailyne@nospillsystems.com or fax (888)876-7982.

Please make checks payable to: *No-Spill Systems, Inc.* and mail to the address below:

No-Spill Systems, Inc.
PO Box 243
231 South 5th Street
Pembina, ND 58271

Thank you for your assistance in this matter.

Mailyne Vandal
No-Spill Systems