



Credit Card Authorization Form
info@nationwidewasteservice.com
(855) 301-2530

Cardholder Name (as shown on card): _____

Cardholder Phone: _____ Email: _____

Card Number: _____ Expiration Date (mm/yy): _____

Billing Address: _____

City, State, Zip: _____

Amount Authorized: _____

Type of equipment: _____

Delivery Address: _____

City, State, Zip: _____

Site contact name and phone number: _____

Name on building or color of house: _____

Placement instructions (Final placement is at the driver's discretion, we will do our best to accommodate):

Delivery date: _____ Pickup date(Events only): _____ ***Construction and long term orders are a recurring charge. You are required to call once the work is complete to schedule pickup and stop billing***

Event date or estimated length of rental: _____

Customer Signature: _____ Date: _____

Order is non refundable. You are responsible for the unit if damaged or stolen.