SSI CREDIT CARD AUTHORIZATION FORM

Date:

I _____herby authorize SSI Lubricants, LLC [dba SSI
[Print Name]
Petroleum] to charge my credit card for each individual order placed. This authorization

will stay in place until otherwise stated in writing and email to payment@ssipetro.com.

A copy of the credit card receipt will be emailed to _____
[email address]
after each transaction.

CREDIT CARD AUTHORIZATION: ☐ **VISA** ☐ **MC** ☐ **AMEX** ☐**DISCOVER**
Please complete fields. This authorization will remain in effect until cancelled. You may cancel this authorization at any time by contacting us at payment@ssipetro.com.

You will be contacted by an SSI representative for credit card information.

NAME ON CARD: _____

_____
CARDHOLDER ADDRESS CITY STATE ZIP

PHONE NUMBER:_____

I hereby authorize SSI Lubricants and any of its subsidiaries to charge the above credit card for agreed upon purchases. I understand that my information will be saved for future transactions on my account. I will receive a copy of the invoice and my card will be charged within 24 hours and emailed to the above contact information.

Customer Signature: _____ Date: _____

Please complete the above form, sign, and email back to payment@ssipetro.com

SSI Lubricants, LLC [SSI Petroleum]
877-811-FUEL
WWW.SSIPETRO.COM

West Palm Beach * Belle Glade * Winter Haven
Port Everglades * Port of Palm Beach * Port of Tampa