



AUTHORIZATION FOR CREDIT CARD SERVICES

Master Card _____

VISA _____

MERCHANT AGREEMENT: INCONET - DATA MANAGEMENT SAL
BEIRUT-LEBANON

NAME OF CARDHOLDER : _____

CREDIT CARD NUMBER : _____

EXPIRY DATE : ____ / ____ CVV Code: _____

SIGNATURE of CARD HOLDER :

X _____

The issuer of the identified card is authorized to pay the amounts reported on all invoices sent for settlement being manual or electronic even without the signature of the cardholder and this applies as early as its presentation to the MERCHANT AGREEMENT.

The cardholder identified on the document pledges to pay the invoice amounts processed manually or electronically under the MERCHANT AGREEMENT, and this according to the clauses of the base contract relating the cardholder and the merchant as well as the clauses governing the utilization of this card.

If you are an American Express card holder, please fill the below:

I hereby authorize IncoNet - Data Management S.A.L., to charge the total amount of my Data Communication Access services bill each month to my AMEX credit Card.

Name of Cardholder: _____

Credit Card Number: _____ **Alpha Code** _____

Expiry Date: _____

Billing Address: _____

If I receive a replacement credit card, account number, or new expiration date, I will immediately inform IncoNet - Data Management sal of the new details. This authority shall be effective for the new credit card. If my credit card account is canceled or suspended for any reason, I will inform IncoNet - Data Management sal immediately. This authorization is to remain in full force until IncoNet - Data Management sal receives written notification. If a charge is made to my credit card account in error, I will receive a credit for the amount due after bringing it to the attention of IncoNet- Data Management sal.

Signature : _____