

P.S.S.S.

**Pack & Stack
Storage
Solutions**
L.L.C.



Pack and Stack Storage Solutions L.L.C.

Making Shipping Fast, Easy, Convenient & Affordable

Credit Card / Shipping Authorization Form

Please Have This Form Completed Prior To Your Pick-Up

Customer Information:

Customer Number: _____

Customer First Name: _____

Customer Last Name: _____

Billing Information:

Credit Card Type: (Please Circle) VISA MasterCard AMEX Discover

Credit Card Number: _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _

Expiration Date: (MM/YYYY) _____ CVV Number: (3 – 4 Digits) _____

Billing Address: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

I authorize Pack and Stack Storage Solutions L.L.C. to charge the credit card above for any shipping charges and fees. I understand that I will not be provided a shipping quote at the time I drop-off or have my items picked-up. Shipping rates depend on the weight, shipping location and dimensions. To know the price beforehand it is my responsibility to weigh, measure and provide this information to Pack and Stack Storage Solutions L.L.C. to consult and best guest estimate.

Signature: _____

Printed Name: _____

Date: _____

Please Print The Shipping Address Neatly & Legibly
