



## PRE-AUTHORIZED PAYMENT TERMS AND CONDITIONS

Please print the following form

I authorize DHL Express (Canada) Ltd. to keep my signature on file and charge my credit card each month to process DHL Express (Canada) Ltd. invoices for the amounts due in accordance the payment terms stipulated in my DHL Express (Canada) Ltd. customer agreement.

I understand that this authorization is valid indefinitely unless I cancel the authorization through written notice prior to the next due date of the pre-authorized credit card charge.

I will notify DHL Express (Canada) Ltd. in writing of any changes in credit card information or termination of this authorization prior to the next due date of the pre-authorized credit card charge.

I warrant that all persons whose signature(s) are required to sign on this account have signed this agreement.

## PRE-AUTHORIZED PAYMENT AUTHORIZATION

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_

Position Held within Organization: \_\_\_\_\_

DHL Express (Canada) Account Number(s): \_\_\_\_\_

Credit Card Type (Visa I Amex I Master Card): \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Card Verification Data (last 3 digits on the back of credit card) : \_\_\_\_\_

Cardholder's Name (as it appears on card): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E mail Address: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

I (we) acknowledge that I (we) have read, understood and accepted all the provisions contained in the Terms and Conditions of the Pre-Authorized Payment Authorization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send to: [customercareca@dhl.com](mailto:customercareca@dhl.com) Attention: Collections

18 Parkshore Dr • Brampton ON L6T 5M1

FAX: 1.888.442.4488 [www.dhl.com](http://www.dhl.com)