

DEALER PAY Credit Card Authorization Form

Step 1: Fill out the form.

Step 2: Call for authorization (not required, but if you need to verify funds, this will need to take place) Once DP is available, key enter the transaction as a new sale (or credit)

Contact support anytime for assistance. Please note that if the authorization was obtained before the new transaction was entered, funds could be held for both amounts.

Card Connect Phone Authorization Information: 877-828-0720 Option 3

SALE INFORMATION

| Sale Amount | Repair Order/ Reference Number | |
|--------------------------|--|-----|
| BILLING INF | ORMATION | |
| First/Last Name* | Company Name | |
| Address Line 1 | Email Address | |
| Address Line 2 | Mobile Phone | |
| City | State | Zip |
| *First and last name are | required unless you provide a Company Name | |

*First and last name are required unless you provide a Company Name

| PAYMENT INFORMATION | | | | | | | |
|----------------------|--------------------|-------|--|--|--|--|--|
| Credit Card | | | | | | | |
| Card Number | | | | | | | |
| Expiration | CVV Code | | | | | | |
| Authorized Signer | Customer Signature | Title | | | | | |
| | Printed Name | Date | | | | | |

| ACH INFO | RMATION | | |
|-----------------------|----------------------|------------------------|--|
| Bank Accoun | t | | |
| Corporate or Personal | | Account Type | |
| Routing Number | | Account Number | |
| | | Confirm Account Number | |
| Authorized Signer | Customer Signature _ | Title | |
| | Printed Name | Date | |
| | | | |

*Please note that this transaction will not be authorized immediately. This approval will take place at a later time. If for any reason, the transaction is declined, you are still responsible for payment. The dealership may reach out to you to obtain an alternative payment method.

*Please enter as a card not present payment once the system is up and running again, for assistance please reach out to support at 636.442.4901 x 2 or by email support@dealer-pay.com