

DSV Road Transport, Inc.
3665 W Broadway, PO Box 16050
Missoula, MT 59808-6050
(406) 728-2600; (800) 548-9276

CREDIT CARD AUTHORIZATION FORM

I hereby authorize **DSV Road Transport, Inc.** to charge the credit card listed below for payment of freight charges incurred by the credit card holder. I guarantee and warrant that I am the legal card holder for this credit card and that I am legally authorized to sign this form. I agree that I will not dispute any charges from DSV Road Transport, Inc. unless I have already made an effort in good faith to rectify the situation directly with DSV Road Transport, Inc. and those efforts have failed.

CREDIT CARD HOLDER INFORMATION			
Transaction Amount	\$		
Credit card type	American Express		
Credit card #		(Security Code)	
Expiration Date	(Month)	(Year)	
Customer Information			
First/Last Name			
Company Name			
Street Address 2			
City/State/Postal Code			
Country			
Phone Number			
Email address			
Fax Number			
Type of Account	Personal	Business	
Want receipt sent?	(please circle one)	YES	NO
If yes, email, fax or mail?	(please circle one)	EMAIL	FAX MAIL

Return this completed form to DSV Road Transport, Inc. via fax to (406) 829-4509 or email to road.mso.billing@us.dsv.com. Thank you for your business!

Date

Authorized Signature

For internal use only.
Credit card accepted or declined.

Confirmation #: _____

Salesman: _____

Pro #: _____

Date: _____