

Foxliquidation.com
PO Box 465
Huntingdon Valley, PA 19006
Tel 888-808-4934 Fax 866-517-0309



Credit Card / PayPal Authorization Form

CARDHOLDER INFORMATION

Name: _____

Billing Street Address: _____

Street Address (cont.): _____

City: _____ State: _____ Postal Code: _____

Email _____ Direct Telephone: (_____) _____ - _____

CREDIT CARD INFORMATION / PayPal Info

Credit Card Type: ☐ MasterCard ☐ Visa ☐ Discover Card ☐ Amex

Number: _____

Expiration Month: _____ Expiration Year: _____

Cardholder Signature X _____ Date ____/____/____

Security Code: _____

PayPal Email (for payments by PayPal only): _____

I, _____, authorize Foxliquidation.com/Vertexa LLC to charge the credit card/PayPal above for purchases I make from the foxliquidation.com website.

I fully acknowledge that:

-all orders are FINAL and NONREFUNDABLE.

-deposits are NONREFUNDABLE.

-due to the nature of liquidation business, there are varying percentages of distressed merchandise in each lot.

-all merchandise is sold AS-IS, Foxliquidation.com makes no guarantee expressed or implied as to merchandise fitness or marketability.

-orders cannot be cancelled, returned, exchanged, modified or refunded.

Signature: _____ Date: _____

Please fax your completed Credit Authorization form to 866-517-0309.

Please include a copy of the front and back of your credit card and a driver's license or valid state id.

****You can leave last 4 digits of credit card and cross out all sensitive information.***