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## **CREDIT/DEBIT CARD PAYMENTS**

PLEASE COMPLETE SEND AND BACK VIA EMAIL ([daheadey@pif.co.uk](mailto:daheadey@pif.co.uk)) OR FAX (+44 (0)845 6216 112)

VISA DEBIT  
 MASTERCARD  
 SOLO

VISA CREDIT  
 MAESTRO  
 VISA ELECTRON

CARD NUMBER \_\_\_\_\_

EXPIRY DATE \_\_\_\_\_

ISSUE NUMBER \_\_\_\_\_

(MAESTRO OR SOLO CARDS ONLY)

START DATE \_\_\_\_\_

(MAESTRO OR SOLO CARDS ONLY)

CARD SECURITY CODE \_\_\_\_\_

(LAST 3 DIGITS ON SIGNATURE STRIP)

CUSTOMER REFERENCE \_\_\_\_\_

(IF REQUIRED)

CHARGEABLE AMOUNT \_\_\_\_\_

(AS ADVISED)

CARD HOLDERS NAME  
 AND FULL ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

POSTCODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

CUSTOMER SIGNATURE \_\_\_\_\_

<b><u>OFFICAL USE</u></b>	
SIGNATURE (CONTROLLER)	_____
DATE	_____
STATUS	ACCEPTED / DECLINED

ALL CREDIT CARD PAYMENTS WILL BE SUBJECT TO 2.5% SURCHARGE.