PULSAR CREDIT AUTHORIZATION FORM



Contact Information			
Name			
Billing Address			
City	State	Zip Code	Country
Credit Card Informa	ation		
Credit Card Type			
Credit Card Number		Expiration Date	Security Code
Credit Card Authorization Type Check appropriate box			
 □ Keep on File to Charge Subsequent Installments □ Keep on File for Future Orders □ Other (Please Specify) ————————————————————————————————————			
By signing this form, you ("Customer") authorize Pulsar Connected LLC ("Pulsar") to charge your credit card according to the payment option selected: one-time charge, charge for subsequent installments, keep on file for future orders, or other. If "Keep on File" is selected, you authorize Pulsar to store your card information securely and charge your card for future payments related to your account, including but not limited to service renewals, hardware purchases, reactivation fees, and usage overages, in accordance with your service agreement and invoicing terms. You may revoke this authorization at any time by submitting written notice to billing@pulsarbeyond.com, allowing reasonable time for processing. You agree that all charges will be made in U.S. dollars and that you are responsible for notifying Pulsar of any changes to your card information. All applicants agree that credit card payments may be subject to applicable surcharges and convenience fees, which will be disclosed at the time of transaction and added to the total amount charged. If your payment is declined or if a chargeback occurs, you may be subject to additional fees, service interruption, or account suspension until the balance is resolved. By signing below, you acknowledge and agree to these terms and authorize Pulsar to process the selected payments as described.			
Signature		Da	te
Printed Name			
Title			_