

TCS /Technological Cinevideo Services, Inc.

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Authorization

To:	From:
Fax:	Pages:
Phone:	Date:
<i>Please list name of Company/Prod./ ETC.</i>	
Re:	CC:

PLEASE SUBMIT COMPLETED FORM WITH ALL INFO BELOW ALONG WITH A COPY OF THE FRONT & BACK OF YOUR CREDIT CARD AS WELL AS A COPY OF YOUR VALID STATE ISSUED ID OR VALID US PASSPORT.

I hereby authorize Technological Cinevideo Services, Inc. d/b/a TCS to charge:

In the amount of \$ _____ as a **security deposit** authorization on the equipment;

NOTE: A SECURITY DEPOSIT IS THE INSURANCE DEDUCTIBLE YOU ARE RESPONSIBLE FOR

In the amount of \$ _____ as a **NON-REFUNDABLE deposit** to hold a rental

In the amount of \$ _____ as a **RENTAL, SALES OR REPAIR FEE** (including any additional rental charges, expendable charges, delivery fees, late return fees and/or missing, damaged or repair fees. All charges are final and cannot be refunded.)

Please Check One: Single time transaction Please keep card on file

Card Type: American Express VISA MasterCard

(please print with large block letters)

Name on the Credit Card _____

CC Holders Signature: _____

Credit Card Numb.: _____

Expiration Month: _____ Year _____

(CVV) Security Code: _____

Billing Address on _____
Credit Card

City _____ State _____ Zip _____

Billing Tel. _____ Fax _____

Please be aware that the amount authorized as security deposit will be unavailable for approximately 15-20 business days from date of authorization. *Please note: in sending back a completed authorization you are agreeing to all of the stated terms and conditions, including those of the attached Rental/ Sales Agreement (section 3)*