the pressure equipment safety authority

Please submit to:
9410 – 20th Avenue
Edmonton, AB T6N 0A4
Tel (780) 437-9100 Fax (780) 437-7787

Credit Card Authorization Consent Form

Please complete and submit by e-mail to **AR@absa.ca** or, **Fax** your payment authorization to the Finance Office at **1-780-437-7787.**

Company Name: _____

Customer Account No: _____

Name: _____

Phone Number: _____

E-mail: _____

Invoice, or Account Numbers you are paying: _____

Total Amount you are paying: _____
US Dollar payments will be processed in equivalent Canadian funds

We accept **Visa, MasterCard and AMEX**

Credit Card Number: _____

Credit Card Expiry Date (Month/Year): _____

Name on Credit Card: _____

Authorized Signature of Cardholder: _____

Yours truly,

Finance
ABSA the pressure equipment safety authority
AR@absa.ca Phone (780) 437-9100 EXT 3308

Please note, it is ABSA's strict policy that credit card numbers and related information are not kept on file and disposed of immediately after payment is processed by cross-shredding.