



**C.C. AUTHORIZATION FORM**

**CUSTOMER PROFILE**

Full Company Name: \_\_\_\_\_ Company Phone #: \_\_\_\_\_  
 Company Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Applicant's Last Name: \_\_\_\_\_ Applicant's First Name: \_\_\_\_\_  
 Applicant's Telephone #: \_\_\_\_\_ Applicant's Email Address: \_\_\_\_\_  
 Applicant's Driver's License: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Individuals authorized to rent:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Driver's License: \_\_\_\_\_

**Credit Card Authorization**

I \_\_\_\_\_ hereby authorize Cooper Equipment Rentals Limited to charge my credit card listed below, for all charges incurred by the above listed authorized individuals, including but not limited to all sales, rentals, repairs, deposits, CPP, delivery, pick-up, damages, environmental fees and taxes.

Credit Card Type:      Visa \_\_\_                      Mastercard \_\_\_                      Amex \_\_\_

**Credit Card Billing Information:**

Card holder's name as it appears on the credit card: \_\_\_\_\_  
 Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ CVV#: \_\_\_\_\_  
 Card Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Drivers License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Card holders signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR COOPER EQUIPMENT RENTALS LIMITED USE**

Customer # \_\_\_\_\_ Employee Name \_\_\_\_\_

\*submit in person to your local Cooper Equipment Rentals branch.