



Credit Card Payment Form

Please fill out this form in its entirety - **incomplete forms may delay shipment of metal.** Credit card payments are subject to a 3% convenience fee

Upon receipt of credit card payment, your order will be immediately scheduled for delivery

Type: ___ Debit ___ Visa ___ MasterCard ___ Discover ___ American Express

Credit Card Number: _____ Expiration Date: _____

CRV (3 or 4 digit code) _____

Billing Zip Code: _____

Name on card: First _____ Middle _____ Last _____

Street Address: _____

Company: _____

Phone Number: _____

Payment Amount: _____

Signature Authorizing One Time Use:

Signature Authorizing Taylor Metal to keep your card on file for use in future payments:

**Please fax completed form to: 503-581-6877
OR email to AR@taylormetal.com**

Thank you for your payment!