

## Credit Card Authorization for 3<sup>rd</sup> Party Services

I hereby authorize Alliance Mortgage Group and its representatives to bill my credit card or the following services:

Appraisal

Field Review

Credit Report

Credit Report Supplement

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Number: \_\_\_\_\_

Visa       Mastercard       AmEx

Credit Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_/\_\_\_\_      Security Code \_\_\_\_\_

Signature: \_\_\_\_\_