ZAGARA HOME LLC
1912 Highway 35
Oakhurst, NJ 07755
Phone: 732.517.1041
Fax: 732.517.0592
www.zagarausa.com

Credit Card Authorization

#00-_____

I hereby authorize Zagara Home LLC. to charge the listed account:

___ Current order

___ Current and future orders

Name (as it appears in back of the card) _____
Print

Billing address of card _____
Number, Street Name, Apartment/Unit/Suite Number

City: _____ State: _____ Zip Code: _____

Card Type: VISA ☐ Master Card ☐

Card Number: __ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __

Expiration Date: __ __ / __ __
Month Year

Amount: $ _____
in U.S. Dollars

Validation code (last 3 digits on back of card): _____

Signature of card holder: _____ Date: _____

Please mail it or fax back as soon as possible so we can finalize the transaction. We will charge your card on the actual day of shipment.