



Credit Card Authorization Form

| | |
|------------------------------------|--|
| Operator or Applicant Name | |
| Address & Postal Code | |
| | |
| Certificate Number (if applicable) | |
| Payment | <input type="checkbox"/> New Application - \$150.00 <input type="checkbox"/> Renewal Application - \$150.00 <input type="checkbox"/> Certificate Reprint - \$25.00 <input type="checkbox"/> Renewal Label Reprint - \$25.00 |

By completing this form I authorize the Operator Certification Board to charge my credit card with the amount as indicated for the above named individual:

| | |
|--------------------------|--|
| Card Holder Name | |
| Address & Postal Code | |
| Email Address | |
| Card Type | <input type="checkbox"/> Visa <input type="checkbox"/> American Express <input type="checkbox"/> MasterCard |
| Credit Card Number | |
| Expiry Date (month/year) | |
| Amount | |
| Signature of Cardholder | |
| Date | |

The Operator Certification Board will not charge any amount to your credit card unless this form is completed in full. Your certification may be delayed, resulting in lapsed or expired certification if this form is received incomplete.