



# CARD PAYMENT AUTHORITY FORM

v4.2024

U-Drive Limited, registered in England & Wales, 3183986. Registered office: 48-56 Old Wareham Road, Poole, BH12 4QR.  
T: 0800 980 9966 E: accounts@u-drive.co.uk VAT registration number: 222 45 82 84

Originating branch

## Section A: Company Type

Public Limited (PLC)  
Partnership

Private Limited (LTD)  
Sole Trader

Partnership (LLP)

## Section B: Company Details

Company Name

Registered Address

Trading Address  
(if different)

Telephone

Mobile

Company Reg Number

Nature of Business

Contact

Postcode

Postcode

Fax

Email

Date Established

### Directors / Partners:

Name:

Address:

Postcode:

Date of Birth:

Name:

Address:

Postcode:

Date of Birth:

### Authorised Account Users:

Full Name:

Full Name:

Full Name:

Full Name:

Buyer:

Buyer:

Buyer:

Buyer:

Driver:

Driver:

Driver:

Driver:

## Section C: Individual Details

Only complete this section if you selected Sole Trader or Private Individual in Section A:

Name

Name (to appear on Hire Agreement)

Company Name (if applicable)

Address

Date of Birth

Telephone

Postcode

Mobile

Email



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## Section D: Payment

Pay by stored Credit Card;

CV2:

Your stored Credit Card information is held within a secure online environment via our merchant services provider (Sagepay). This is the easiest way to pay, we can access your account details online each time you rent a vehicle and bill or credit the charge accordingly. If you need to extend the hire any additional charges can immediately be applied without the need to come into the office with your credit card each and every time. The fast and easy way for the business or individual who hires on a regular basis. Your card billing address must match your address. Any changes of card must be notified immediately. If another card is being used, normal rental charges and deposit apply.

Purchase Order Mandatory:

Customer Signature

Customer's Own Insurance:

(Please provide insurance policy schedule and certificate)

Please Note: This is **not** a credit facility. Payment is required in advance.

## Section E: Authorisation and Acceptance

### Credit Search Consent: (this will not affect your credit rating)

You may undertake a search with Experian for the purposes of verifying my identity and credit situation. To do so, Experian may check the details I supply against any particulars on any database (public or otherwise) to which they have access. They may also use my details in the future to assist other companies for verification or credit checking purposes. A record of this search will be retained.

Consent Signed:

Print Name:

Date:

### Authority:

By selecting the Stored Credit Card option, I confirm that I am giving permission for U-Drive Limited to charge my Credit/Debit card each time a payment becomes due under a continuous payment authority (CPA). I understand that I can cancel this authority at any time. Please note: If authority is cancelled all bookings will revert to U-Drive Limited's standard terms, including the rates and deposit.

I, the Director/Partner/Trustee/Member agree to guarantee performance of all the company's/partnership's/limited liability partnership's current and future obligations to U-Drive Limited.

Signature:

Position:

Print Name:

Date:

This form must be approved before acceptance:

For Office Use Only: Ops Mngmnt Approved:

Finance Approved:

Initials Date

Initials Date

Tariff: 03/2023

05/2023

Client No.

Date