



**DOUBLE  
DOWN  
LIGHTING**

9 Hackensack Ave Unit B & C,  
Kearny, NJ 07032  
doubledownlighting.com

(201) 630-4801 / info@doubledownlighting.com

## Credit Card Payment Authorization Form

Sign and complete this form to authorize **Double Down Lighting** to make a charge to your credit card listed below.

By signing this form you give us permission to charge your account for the amount indicated on or after the indicated date.

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**Please complete the information below:**

I \_\_\_\_\_ authorize **Double Down Lighting** to charge my credit card  
(full name)

on or after \_\_\_\_\_. This payment is for \_\_\_\_\_.  
(date) (description of goods/services)

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

Phone# \_\_\_\_\_

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

Email \_\_\_\_\_

Account Type:  Visa  MasterCard  AMEX  Discover

Cardholder Name \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized user of this credit card. **AS OF JANUARY 2024... A 3.5% credit card processing fee will be applied to all credit card transactions.**



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## **DOUBLE DOWN LIGHTING LLC**

### **ACH / WIRE INFO:**

Bank of America, MA  
222 Broadway  
New York, New York 10038  
(800) 424 2172

**Account#:383028343686**

**ACHRouting#:031202084**

**Wire #:** 026009593

**Payment Via ZELLE to [info@doubledownlighting.com](mailto:info@doubledownlighting.com)**

**Please Reference Invoice or Estimate # when making ACH payment**

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