



P.O. Box 91687
Austin, Tx 78709-1687

Dear Valued Customer,

In an effort to accommodate your request for FP Legacy Landscaping LLC. to take your credit card information over the phone for purchases or payment towards your account and at the same time assuring your information will remain confidential, we are requesting that you sign this letter giving us permission to manually key in your information through our Point of Sale system.

We will save your credit card information under your file confidentially.

Please complete the information below and sign. We will retain this letter under file.

Sincerely,

FP LEGACY LANDSCAPING LLC

PLEASE SIGN AND RETURN

I hereby give FP Legacy Landscaping LLC. permission to manually enter my credit card information into their P.O.S system for balances owed on my account. I agree to update any information regarding my account; the information below is complete and correct to my knowledge.

Name on Card: _____

Credit Card Number: _____ Exp: _____

Card Type: VISA Master Card AMEX Discover

Sec. Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Date

Customer Signature

I certify I am the authorized user of this credit card and I will not dispute payments, provided the transactions correspond to the terms indicated in this agreement.