



**V-Twin Mfg.**  
**Tedd Cycle, Inc.**  
 6 Jeanne Drive  
 Newburgh NY 12550



**Credit Card Authorization**

**VISA, MASTERCARD, DISCOVER OR AMERICAN EXPRESS ONLY**

**TEDD CYCLE, INC.** will accept Visa, Mastercard, Discover or American Express credit cards for the purchase of motorcycle parts after this form has been completed and returned to us or you can call 1-800-833-8946 to add your credit card information. Credit cards will be charged on the day of shipment. Card holder must be company Owner or Partner.

Date \_\_\_\_\_ Customer# \_\_\_\_\_ Phone# \_\_\_\_\_

Company Name \_\_\_\_\_ DBA \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card# 1 \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Check which account(s) to apply card to:  Primary Account  Dropship Account

Address where you receive your credit card bill \_\_\_\_\_

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

Card holder Name (Print) \_\_\_\_\_

Signature of Card holder \_\_\_\_\_

Card# 2 \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Check which account(s) to apply card to:  Primary Account  Dropship Account

Address where you receive your credit card bill \_\_\_\_\_

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

Card holder Name (Print) \_\_\_\_\_

Signature of Card holder \_\_\_\_\_

V-Twin Mfg.  
Tedd Cycle, Inc.

Card# 3 \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Check which account(s) to apply card to:  Primary Account  Dropship Account

Address where you receive your credit card bill \_\_\_\_\_

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

Card holder Name (Print) \_\_\_\_\_

Signature of Card holder \_\_\_\_\_

Card# 4 \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Check which account(s) to apply card to:  Primary Account  Dropship Account

Address where you receive your credit card bill \_\_\_\_\_

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

Card holder Name (Print) \_\_\_\_\_

Signature of Card holder \_\_\_\_\_

Card# 5 \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV \_\_\_\_\_

Check which account(s) to apply card to:  Primary Account  Dropship Account

Address where you receive your credit card bill \_\_\_\_\_

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

Card holder Name (Print) \_\_\_\_\_

Signature of Card holder \_\_\_\_\_

The Undersigned \_\_\_\_\_ hereby guarantees payment of all  
money due and owing to TEDD CYCLE, INC. by \_\_\_\_\_ for purchases  
already made or to be made in the future from TEDD CYCLE, INC., and agrees that guarantor will pay the full amount  
owed to TEDD CYCLE, INC. in the event that the company named above does not pay the amount owed when due.

X \_\_\_\_\_  
signature of owner or partner

**Please allow 24 business hours for processing**