

D	
Date:	

## **Accounting Department**

One Pacific Place Serviced Residences 161 H.V. Dela Costa St., Salcedo Village, Makati City

## Re: Authority to Charge / Deduct Credit Card (ATD)

I hereby authorize One Pacific Place Serviced Residences to charge my credit card for the bills of:

Mr./Mrs./Miss		wi		
Mr./Mrs./Miss		with Room No  - All charges incurred by guest/s - Room charges only - Food and beverage charges only - All incidental charges - Others		
Charges to be billed to me w	vill include:			
Incurring period from		to		amounting to
Php Attached	d are the scar	nned clear c	opies of the f	ront and back of my
credit card and a copy of my	valid ID.			
My credit card details are as Card Holder's Full Na				
Card Number:		E	xpiry Date:	
Card Issuing Bank:				
	□ Amex	□ Others	5	
Billing Address: Cellphone Number:_				
Celiphone Number	OII	ice/Home 16	a. INUITIDEI	

## **Important:**

- 1. Processing time for this kind of transaction will be two to three weeks. To expedite the processing of your request, please inform your issuing bank about the above transaction.
- 2. If the hotel cannot get the approval from the bank when guest checks in, all charges will be on personal account of the guest.
- 3. Please enclose a scanned copy of your credit card (front and back).
- 4. Please enclose a scanned copy of your valid passport.

Card Holder's Signature	