

# THIRD PARTY CREDIT CARD AUTHORIZATION

La Hacienda Motel



5414 1<sup>st</sup> AVE S.  
Seattle, WA 98108

Phone: 206-762-2460  
Fax: 206-762-8888

Email: lahaciendamotel@comcast.net

## RESERVATION INFORMATION:

Guest Names:

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ARRIVAL (AFTER 3PM):

DEPARTURE (BY 11AM):

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**Please circle the category that the credit card is authorized to be used for:**

- ALL CHARGES
- ROOM & TAX
- INCIDENTALS DEPOSIT (Required to cover damage, pets, rollaway bed, extra parking, etc)
- BUSINESS CENTER CHARGES (Printing, phone, fax)
- COVENIENCE ITEMS: Snacks, Canned goods, Personal care and toiletries.

## CREDIT CARD HOLDER INFORMATION:

*(Please fax a copy of the front and back of the credit card to be used)*

Type of card: **VISA** **MASTERCARD** **AMERICAN EXPRESS** **DISCOVER**

Credit card number:		Expiration:	
Name on card:			
Card holder address, Phone number, eMail:			

*Your signature below will constitute a binding agreement for full payment for the above-specified charges as well as any damages incurred to room accommodations by guest or guest's acquaintances.*

Card holder's signature:  Date:

**Please fax or mail this form along with a copy of the front and back of your CREDIT CARD and PHOTO ID, to the hotel. Please make sure numbers and signatures are legible. When making copies of PHOTO ID and CARD set your copier to the lightest settings.**