

CREDIT CARD AUTHORIZATION FORM (One time only)



CLASSIC COLLECTORS® INSURANCE PROGRAM  
Hot Rod Insurance Services, Inc.  
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Complete this section:

**CREDIT CARD ACCEPTANCE:** I authorize Infinity Property & Casualty Corporation to charge my premium payment for my Classic Collectors auto insurance application to my Credit Card.

Policy / Submission Number: \_\_\_\_\_  To Be Determined

Applicant Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name as it appears on Credit Card if Different than above: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

CREDIT CARD INFORMATION:

Card Type: \_\_\_\_\_ VISA      \_\_\_\_\_ Master Card      \_\_\_\_\_ American Express

Credit Card Account #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Amount: