# BOVONI MAIL CENTER

**CREDIT CARD AUTHORIZATION — RECURRING PAYMENTS**

**7410 Estate Bovoni, STE #5**
St. Thomas, USVI 00802
bovonimailcenter.com · info@bovonimailcenter.com

## 1 CARDHOLDER & ACCOUNT INFORMATION

CARDHOLDER NAME (AS IT APPEARS ON ACCOUNT)

BMC MAILBOX / ACCOUNT NUMBER
*to be filled in by BMC staff*

BILLING ADDRESS

CITY / STATE / ZIP

PHONE

EMAIL

## 2 PLAN ON FILE (AT SIGNING)

☐ Basic Mail — $20/mo ☐ Light — $30/mo ☐ Standard — $40/mo ☐ All-Inclusive — $75/mo

☐ Other/Bundle: ..... $ ..... /mo

☐ **One-Time Setup Fee** — $15.00 at signup (mailbox assignment & Form 1583 processing)

☐ **Business Surcharge** — $10.00/month

☐ **Additional Recipient Name(s)** — $5.00/month per name × ..... name(s)

MONTHLY AMOUNT AT SIGNING
$

BILLING DATE EACH MONTH

FIRST CHARGE DATE

*This is a snapshot at signing. Per Section 4, no new form is needed if the plan or add-ons change later — only if the card on file changes.*

## 3 CARD INFORMATION

☐ Visa ☐ Mastercard ☐ American Express ☐ Discover

CARD NUMBER

EXPIRATION (MM/YY)

CVV

BILLING ZIP CODE

NAME ON CARD (IF DIFFERENT FROM CARDHOLDER NAME ABOVE)

## 4 AUTHORIZATION

I authorize Bovoni Mail Center ("BMC") to charge the credit/debit card identified above, through BMC's payment processor, Stripe, Inc., on a recurring monthly basis for whichever mailbox plan and add-on services are active on my account from time to time, billed at BMC's then-current published rates. This includes the plan and add-ons selected in Section 2 at signing, any plan or add-on change I later request, and any variable usage-based fee I incur (including but not limited to per-package overage charges, Customs Concierge advances, and Extended Hold fees). If my recurring monthly amount changes — for example, if I switch plan tiers — BMC will notify me of the new amount in writing before it is charged; no new authorization form is required unless I add a new or different card. Charges will appear on my card statement under BMC's billing entity name, Island Edge Culinary, and not necessarily as "Bovoni Mail Center."

This authorization will remain in effect until I cancel it in writing (by mail or email to the address above), providing at least ten (10) business days' notice before the next scheduled billing date. I understand that BMC's services are billed in advance and are non-refundable for partial billing periods except as otherwise stated in BMC's service terms.

I am responsible for notifying BMC promptly of any changes to this card, including a new card number, updated expiration date, or cancellation of the card. I certify that I am the cardholder, or am authorized by the cardholder, to provide this authorization.

CARDHOLDER SIGNATURE

DATE

**Handling this form:** This form contains sensitive cardholder data. Deliver it in person or via a secure channel — do not email or text a photo of the completed form. BMC will enter this information directly into Stripe and then securely shred the physical form; never retain a completed copy longer than necessary to do so. **Statement descriptor:** charges will most likely appear on the statement as *"ISLAND EDGE CULINARY"* (BMC's billing entity) — confirm the exact text in Stripe Dashboard → Settings → Business → Public details before printing further copies.

*This is a template document, not legal advice. Card network rules (Visa/Mastercard/Amex/Discover) impose specific requirements for recurring-transaction authorizations, and requirements can vary by processor and jurisdiction. Have this form reviewed by your attorney or Stripe's compliance guidance before formal use, and confirm your data-retention practices meet PCI-DSS requirements for handling paper forms with full card numbers.*