



SAFE ACCESS AUTHORIZATION

****PLEASE BE ADVISED THERE IS A ONE TIME NON-REFUNDABLE FEE OF \$70.00 PAYABLE ONLY BY VISA, MASTERCARD OR AMERICAN EXPRESS CREDIT CARD FOR ALL SAFE PHONE ASSISTS / OVER RIDE CODES. AMPHION DOES NOT ACCEPT DISCOVER CARD****

Date: _____

Full Name: _____
Last First M.I.

Company Name: _____

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: () _____ E-mail: _____

Safe Serial Number: _____

How was the safe acquired? Who was the previous owner? Where was the safe purchased from?

Drivers License: _____
State Number

****Please include photo copy of Drivers License****

Signature: _____

FAX OR EMAIL FORM TO:

Amphion
909-204-7422 or 909-204-7409
billing@amphion.biz



CREDIT CARD SALES FORM

I _____ Authorize Amphion Executive Safe to charge my
Visa/Mastercard/American Express (please circle one) credit card for services rendered/parts shipped.
Not to exceed the amount shown.

WORK ORDER _____

AMOUNT **\$70.00** _____

COMPANY NAME _____

CREDIT CARD TYPE _____

CARD NUMBER _____

CVC NUMBER _____

ISSUED DATE _____

EXPIRATION DATE _____

BILLING ADDRESS _____
Include street address,
city and state _____

BILLING ZIP CODE _____

NAME ON CARD _____

PHONE NUMBER _____

FAX NUMBER _____

EMAIL ADDRESS _____

SIGNATURE

DATE

FAX OR EMAIL TO:

Amphion
1-800-520-2677
FAX 909-204-7422 or FAX 909-204-7409
billing@amphion.biz