



THE LUXURY COLLECTION

Date : \_\_\_\_\_
From : \_\_\_\_\_
Company : \_\_\_\_\_
Agent : \_\_\_\_\_
Tel No : \_\_\_\_\_
Fax No : \_\_\_\_\_

To :
Credit Manager
Keraton at The Plaza, A Luxury Collection Hotel, Jakarta
Phone : 62 21 5068 0000
Fax : 62 21 5068 9000

CREDIT CARD PAYMENT AUTHORIZATION

I hereby agree to be personally responsible for full settlement of the hotel expenses as specified below and with this statement authorize Keraton at The Plaza, A Luxury Collection Hotel, Jakarta, to charge on below credit card :

Card Holder Name : \_\_\_\_\_
Credit Card Type : \_\_\_\_\_
Credit Card Number : \_\_\_\_\_ Expiry Date : \_\_\_\_\_
Cardholder Verification Value (CW) Number : \_\_\_\_\_
Billing Address : \_\_\_\_\_

this is to certify that I will cover the expenses for : ( Please tick accordingly )

Charges

Table with 2 columns: Charge description, Amount. Rows include All Expenses, Room Only, Room and Breakfast, Room, Meals and Laundry, Catering Expenses, Others.

For the Guest Name below

Table with 4 columns: No, Name, Check In Date, Check Out Date

I authorise Keraton at The Plaza, A Luxury Hotel Collection Hotel, Jakarta, to bill above charges to my credit card

Cardholder Signature : \_\_\_\_\_

\*\*\* Please Include a legible Photocopy of the front and back of the credit card \*\*\*
\*\*\* Include a Copy of Valid State ID ( KTP ) or Passport for foreigner