

# Hub Financial Inc. - FlexSave™

## Set Up Fee - Credit Card Payment Form

Complete this form only if you are paying your set up fee by credit card

It is strongly recommended that this form, once completed, be inserted into a separate sealed envelope addressed Attention: FINANCE DEPT. as shown below. This envelope should be included with your FlexSave Application.

Attention:  
FINANCE DEPT.

- Courier is preferred method of sending credit card information
- Credit card information will not be maintained by HUB Financial Inc.
- For any question please call 1 (800) 561-2405 Option # 2 (FlexSave hotline)

Company Name: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone# (     ) \_\_\_\_ - \_\_\_\_

Broker: \_\_\_\_\_ Region: ☐ BC ☐ PR ☐ ON

Card Type: ☐  ☐ 

Please charge \$\_\_\_\_\_ to my credit card

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

*By signing you agree that the amount specified above will be charged to your credit card*

\* If payment is rejected, your FlexSave application will not be processed

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Card Holder Name (as it appears on credit card): \_\_\_\_\_

Street Number (as per credit card billing statement): \_\_\_\_\_

Street Name (as per credit card billing statement): \_\_\_\_\_

Postal Code (as per credit card billing statement): \_\_\_\_\_

Card Number: 

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Expiry: 

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Month Year

Security code: 

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(3 digit number on back of the card – usually to the right of the signature strip)