

# Shivam Travel.com

1220 US RT 46 West , suite # 225 , Parsippany , NJ 07054  
**CREDIT/ DEBIT CARD LETTER OF RESPONSIBILITY**

I, \_\_\_\_\_, (PRINT) authorize shivamtravel.com to make the charges specified below to the credit card listed. I accept full responsibility for the charge-backs, disputes and other non-payments by the passenger, credit card holder, credit card company or issuing bank.

Passengers Names as they appear on passports:	
Date of Birth	

Credit Card Number & CVV number:	Expiry Date:	
Card Holders Name:		
Card Holders Address:		
Phone Number :		
Authorised Amount :		

**Fares not guaranteed until payment is received and tickets are issued.**

***Signature Required***

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I am the above-mentioned cardholder. I understand that I am purchasing a ticket that has certain terms and conditions which are in accordance with the policy of the underlying airline. These conditions I must comply with. I agree to the cancellation penalties in the event that I cancel or change my tickets.

**Shivamtravel.com is not responsible for meal request, seat request, mileage accrual or airline's schedule change. It is my responsibility to have proper required documents to board the flight.**

Note that rates are NOT guaranteed until we receive this signed form back by FAX.

**Please include the following:**

**Copy of driver's license to verify signature.**

**Copy of the front and back of the credit card.**

**Please Fax Back to 973 316 9210**