**PAYMENT AUTHORIZATION FORM**

Dear Sir/Madam,

This PAYMENT AUTHORIZATION FORM has been requested by Landing Jeju Development Co., Ltd (the “LJDC”) to allow you to have third party expenses charged to your credit card. Please complete all the information requested and sign below to ensure prompt processing of your application and send email the completed form to LJDC’s email address reservations@shinhwaworld.com.

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| --- | --- | --- |
| Attention : | 신화월드 랜딩관 트윈룸 |  |
| Registered Guest Name (客户名) : |  |  |
| Period of Stay (住宿日期) : | From 2024.01.31 To 2024.02.01  | : night(s) 2박3일 |
| Confirmation Number (预约号码): |   |  |
|  |

|  |
| --- |
|  All Hotel Charges (所有费用) Room/Tax Only (客房费用)  |
| Others (Specify) (其他费用) : |

 |  |
| Daily Room Rate (客房金额/间夜) : | 110,000 원 (1박요금) |  |
|  |  |
| **Total Authorized Amount to Charge (客房金额) :** |  220,000원 (VAT포함) |  |

|  |  |  |
| --- | --- | --- |
| Card Type (信用卡种类) :  |  VISA Master Other \_\_\_\_\_\_\_\_ 카드사 체크 |  |
| Card Number (信用卡号码) : |  |  |
| Expiration date (有效日期) : |  |  |
| Name of Cardholder (信用卡持有人名或法人名) :  |  |  |
| Signature of Cardholder ( (信用卡持有人签名) : |  |  |
| \* I certify and acknowledge that all information is complete and correct. I hereby agree and authorize LJDC to collect the “*Total Authorized Amount to Charge”* to the stated credit card above. This payment authorization is for the amount indicated above only, and is valid for one time use only. I understand that a new form will have to be completed if any changes on the stay requirement which impact on total charges. |  |
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| --- | --- |
| Company Name:  |  |
| Billing Address: |  |
| Name : |   |
| Telephone No: |   |

**Date:**  |  |