



CREDIT CARD AUTHORIZATION

CREDIT CARDHOLDER INFORMATION				
NAME ON CREDIT CARD				
TYPE OF CREDIT CARD (Check Appropriate Box)		MASTER CARD		VISA
TYPE OF ACCOUNT (Check Appropriate Box)		PERSONAL		BUSINESS
COMPANY NAME				
CREDIT CARD NUMBER				
EXPIRATION DATE				*CCV/Security Code
BILLING ADDRESS				
CITY		STATE		ZIP CODE
EMAIL				
PHONE NUMBER		FAX NUMBER		

AUTHORIZATION OF CARD USE
<p>I certify that I am the authorized holder and signer of the credit card referenced above.</p> <p>I certify that all information above is complete and accurate.</p> <p>I hereby authorize collection of payment for all charges associated with the permit application submitted for: _____.</p> <p>Charges may not exceed the amount of the permit plus the 5% credit card fee charged for administrative purposes. (\$_____, if known at time of submission)</p> <p>I understand this authorization form will be shredded once payment is approved and paid. Also, I understand each time a permit application is submitted that a Credit Card Authorization will be attached for payment. A faxed copy of the permit and receipt will be faxed back to the above referenced fax number.</p>

CARDHOLDER NAME (Printed)			
SIGNATURE		DATE	