

F A X E D P E R M I T S

*Credit Card Authorization Form**

I hereby certify that I will comply with any and all declarations and agreements on the faxed permit application that bears my signature. The following employees have my permission to use my credit card to obtain permits in the name of my company.

Company Information

Company Name: _____
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
E-Mail Address: _____
Phone #: (____) _____ - _____
FAX #: (____) _____ - _____

Credit Card Information

Type of Credit Card (circle one): VISA MC
Credit Card #: _____
Expiration Date: ____/____
Cardholder Name: _____
Signature: _____

Authorized Users

Print Name: _____	Signature: _____
Print Name: _____	Signature: _____
Print Name: _____	Signature: _____
Print Name: _____	Signature: _____

For City Use Only

Verified: YES NO Signature: _____ Date: __/__/__

**This authorization is for permit applications received by fax only.*

This form must be returned to City Hall in person or by mail with original signatures. Faxed copies will NOT be accepted.