



Permits, Inspections & Licensing

CREDIT CARD AUTHORIZATION FORM

FAX: (281) 983-2940

I authorize the City of Meadows Place to use my credit card to process the following payment:

DATE: _____

AMOUNT: _____ (A fee of 3.5% will be added to this transactions)

JOBSITE ADDRESS: _____

PERMIT NO: _____

CONTRACTOR: _____

CONTACT NAME: _____

PHONE: _____ FAX NO. : _____

Credit Card: Visa Master Card Discover American Express

Last 4 Digits of Credit Card: _____ Exp Date: _____ CSV Code: _____

Name on Card: _____

Credit Card Billing Address: _____

Authorized User: _____

Signature: _____

***** Please enter Credit Card Number Below *****

***** CUT HERE *****

Credit Card Number: _____

This portion will be destroyed once credit card is run and payment is approved.