

## **BANK CARD TRANSACTION FORM**

This form must be completed and submitted to Planning and Development Department.

\*Transactions cannot be processed unless all information is submitted.\*

Type of Card:	Visa	Mastercard	American Express	Discover	
Payment for: (License,Permit,Sign, Inspection fee,LDP,etc					
Payment Amount:		(processing fee will be added to final total)			
Card Number:		Expiration Date:			
Name on Card:		Security ID#:			
Billing Address:		Billing Zip Code:			
Contact Person:	Telephone #:				
Signature of Card Hold	er				
	******	********	*************	****	
Total Payment:		_			
Processed By:			Date:		

Fax: 706.531.2721