CREDIT CARD AUTHORIZATION

Fax, Mail, or Email completed authorization to:

Attn: Permit Technicians
Building Division
Community and Economic Development
City of Concord
1950 Parkside Drive, MS/51
Concord, CA 94519
Fax: 925-680-4877
Email: bldgpermits@cityofconcord.org

Application Number: _____

Credit Card Number: _____

Expiration Date: _____

Card Holder Name _____ (as printed on card)

Card Type (check one):

[ ] Visa [ ] MasterCard [ ] American Express

Amount Authorized: $_____

I, the undersigned, am the card holder and I authorize the City of Concord to charge my credit card in the amount indicated. The signature must be that of the card holder:

_____ _____

Date Signature