



## Authorization for Payment by Credit Card

The Center for Development Services, Building & Construction Services

OFFICE USE ONLY	Permit No.	Total \$
	License No.	Fee \$

Complete the following:

Job Site Address \_\_\_\_\_

City \_\_\_\_\_, Florida Zip Code \_\_\_\_\_

Type of payment:     VISA     MasterCard     Discover     American Express

Card number \_\_\_\_\_ Expiration date \_\_\_\_\_

V Code \_\_\_\_\_ (Last three digits on the back of the card)

Name (print or type) \_\_\_\_\_  
Name as it appears on the credit card

Card billing address \_\_\_\_\_  
Address used by credit card company to mail billing statements

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder signature \_\_\_\_\_

All information, including zip code, must be completed or your request will not be processed.  
A completed form and signature authorizes Hillsborough County staff to charge fees and/or payments for services or permits as applicable to the cardholder's credit card.

**FOR YOUR CREDIT CARD SECURITY,  
PLEASE FAX YOUR CREDIT CARD INFORMATION  
TO THE FOLLOWING NUMBERS ONLY**

### Fax Numbers

County Center (813) 274-6721

South County (813) 641-6913