



## Credit Card Authorization Form

~ PLEASE MAKE COPIES FOR FUTURE USE ~

Visa or MasterCard Only

[e-permits@coralsprings.org](mailto:e-permits@coralsprings.org)

Cardholder Name (As it appears on the card) \_\_\_\_\_

Company Name \_\_\_\_\_

Type of Credit Card     Visa             MasterCard            3 Digit Security Code: \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Cardholder Address \_\_\_\_\_

Street

City

State

Zip Code

Work Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Fax # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Print Cardholder's Name \_\_\_\_\_

I hereby authorize the City of Coral Springs Building Division to charge the credit card listed above in an amount to be determined according to the current City of Coral Springs Building Permit Fee Schedule, as per your application requirements. This charge is payment for fees and/or services, and is accepted in good faith by the Building Division. Should I have any questions concerning the credit card charge(s) made to my account, I will make every attempt to resolve the issue directly with the Building Division. By signing the above, I acknowledge that I am an authorized signatory for the above referenced credit card.

Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Permit Number: (Required) \_\_\_\_\_

Job description \_\_\_\_\_

Job address \_\_\_\_\_

Re-inspection Fee (Required)  
Type of inspection: \_\_\_\_\_

Re-inspection Date (optional): \_\_\_\_\_

Expired Permit Renewal Fee \$ \_\_\_\_\_     Expedited Plan Review Fee \$ \_\_\_\_\_

Open/Expired Permit Request \$ \_\_\_\_\_

Other (Specify) \$ \_\_\_\_\_