

CREDIT CARD AUTHORIZATION FORM

BUILDING INSPECTIONS DEPARTMENT
www.ci.blaine.mn.us



Permit Address: _____

Cardholder/Company Name: _____

Credit Card Billing Address & Zip: _____

Credit Card Type: _____ Visa _____ Mastercard _____ Discover

Credit Card #: _____ Expiration Date: _____

Amount to Charge*: \$ _____ (USD)

I authorize **City of Blaine** to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement**.

Cardholder – Print Name, Sign and Date Below:

Signed: _____ ***

Dated: _____

Name: _____

CARDHOLDER'S Instructions to CITY OF BLAINE: Return issued permit*** by mail to Cardholder's Address Yes No OR

By fax: _____

CONTRACTOR ONCE SIGNED, SUBMIT COMPLETED FORM ALONG WITH PERMIT APPLICATION TO: Building Inspections Dept., CITY OF BLAINE, 10801 Town Square Drive NE, Blaine MN 55449 OR FAX TO: 763-785-6111.

DO NOT EMAIL THIS FORM AS EMAIL INBOXES ARE NOT SECURE.

*The City will charge an electronic payment card fee of 4% for transactions over \$2,000.

Refunds will be processed by check (less processing and other applicable fees) within two weeks of request.***Any permit requiring a signature AND/OR Approved Plans must be signed in person and plans picked up at Blaine Building Inspections during regular business hours prior to starting work on the site.**