

CREDIT CARD AUTHORIZATION FORM

10801 Town Square Dr. NE Blaine, MN 55449
BUILDING INSPECTIONS DEPARTMENT - BlaineMN.gov
Phone: 763-785-6170 Fax 763-785-6111



Permit Address: _____

Cardholder/Company Name: _____

Credit Card Billing Zip: _____ **MUST BE INCLUDED**

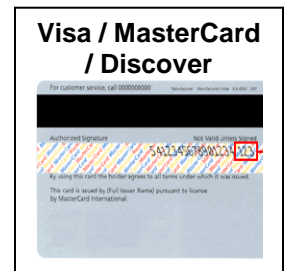
Credit Card Type: _____ Visa _____ Mastercard _____ Discover **NO** American Express

Credit Card #: _____ Expiration Date: _____

Amount to Charge: \$ _____ (USD) **CVV #** _____

Effective 01/16/2018 any transactions for a debit or credit card exceeding \$24.99 will be charged a 2.5% fee.

The verification number for Visa, MasterCard, and Discover cards are a 3-digit number printed on the back. It appears after and to the right of your card number.



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:

Email: _____

Fax: _____ or Other _____

CONTRACTOR ONCE SIGNED, SUBMIT COMPLETED FORM ALONG WITH PERMIT APPLICATION

TO: Building Inspections Dept., CITY OF BLAINE, 10801 Town Square Dr NE, Blaine MN 55449 **OR** FAX TO: 763-785-6111.

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

Refunds will be processed by check (less processing and other applicable fees) within 2 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.**