



Real People. Real Possibilities:

DON SCHONHARDT, MAYOR

Public Service Department

Planning & Building Division



Fax: 614-529-6017

DO NOT E-MAIL!

PAYMENT BY CREDIT CARD

(this is NOT a "soft account" – form is shredded after intended use)

Print name as it appears on Credit Card:

Cardholder or Authorized Signature:

IF THIS IS INCOMPLETE IT WILL NOT BE PROCESSED.

Date: _____

Contact Name & Phone #: _____

List information that will connect this transaction to your permit/inspection/record.
(i.e. address &/or permit number – company name).

Billing Address for Credit Card: *Street # & Zip Code ONLY* Street #: _____ Zip Code: _____

Circle the credit brand you will be using: **VISA MasterCard DISCOVER AMERICAN EXPRESS**

Except for American Express, credit cards have 16 digits: _____

Expiration Date: Month _____ Year _____ 3 OR 4 digit CVN number on back of card _____

If payment is being made by credit card, please provide the information above, sign and return this form.

If payment is for a permit, the form **must** be mailed or faxed with the permit application.

The information contained on this document is not part of the Public Record if faxed and will be shredded after an approval code is obtained.

Thank you,
The Planning & Building Division