

CREDIT CARD AUTHORIZATION FORM

Finance Department | 2006 Heritage Walk | Milton, GA 30004 | 678-242-2500

Please fax this form to 678-242-2499 to ensure the security of your credit card information.

REFERENCE:		
Occupational Tax Certificate (Company Name)		
TYPE OF CARD (please check one)		
□ Visa		
☐ MasterCard		
☐ American Express		
☐ Discover		
Card #		
Expiration Date	Security Code (on back, 3	digits)
First Name (exactly as on card)		
Middle Initial (exactly as on card)		
Last Name (exactly as on card)		
Street Address		
City	State	Zip
As evidenced by my signature below, I agree to allow the City of Milton to tender the amount of my permit to the above captioned Credit Card. I understand that there is a 3% service charge applied. Furthermore, I understand that the City of Milton will issue a permit contingent on the above card being approved for payment.		
Signature of Card Holder:		Date:

*This document will not be kept on file. Once the credit card has been charged the document will be destroyed by the City of Milton.