



**Building Inspections
Credit Card Authorization Form**

Contact Information:

Company Name: _____

First Name: _____

Last Name: _____

Phone Number: _____

Email Address: _____

Payment Info: Visa Mastercard

*****For all credit card transactions there is a 3% convenience charge that is added to your total bill*****

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ / _____ (mm/yyyy)

Billing Zip Code: _____ (Please **do not** include the three-digit code)

******By submitting this credit card authorization form, I give the Town of Fairview permission to charge the credit card information above for permits submitted by the company. ******

Signature: _____ Date: _____

Please submit this authorization form by email, fax, in person, or by mail to the following information:

Email:	permits@fairviewtexas.org
Fax:	(972) 548-0268
Mail/In Person:	Attn: Building Inspections Department 372 Town Place Fairview, Texas 75069

Phone number to verify: _____