



Gateway to Nature & Space

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CREDIT CARD AUTHORIZATION

REQUEST: _____
(CUP, Rezoning, Zoning Verification Letter, et cetra)

PARCEL I.D #: _____

ADDRESS: _____

NAME: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

LAST 4 DIGITS OF CREDIT CARD: _____

NAME AS IT APPEARS ON THE CREDIT CARD: _____

AMOUNT BEING APPLIED TO CREDIT CARD: _____

CARD BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CARD HOLDER SIGNATURE*: /s/ _____

* By entering your name in the "Signature" box above, you are signing this authorization electronically. You agree your electronic signature is the legal equivalent of your manual signature on this authorization. By entering your name in the "Signature" box above, you consent to be legally bound by the terms and conditions of this authorization.

PLEASE COMPLETE INFORMATION BELOW OR PAYMENT WILL NOT BE PROCESSED

CREDIT CARD TYPE: Visa: Mastercard:
(The City of Titusville only accepts VISA and MASTERCARD.)

FULL CARD NUMBER: _____ EXPIRATION DATE: _____

CVV CODE: _____ (LAST THREE DIGITS ON THE BACK OF THE CARD)