



CITY OF ORLANDO



CREDIT CARD AUTHORIZATION FORM

I _____, authorize the City of Orlando Parking
PRINT NAME AS SHOWN ON CREDIT CARD

Division to charge \$_____ to the credit card I am listing below.

.....
 VISA M/C AMX Discover

CREDIT CARD NUMBER

EXP. DATE

SIGNATURE _____ DATE _____

PHONE _____

ADDRESS _____

CITY STATE ZIP

VEHICLE TAG # _____

CARD/PERMIT # _____

***PLEASE ATTACH A COPY (FRONT AND BACK) OF THE CREDIT CARD LISTED ABOVE.**

Revised 9/08 mag