



PLANNING SERVICES

Authorization of VISA/MASTERCARD charge

Please note that e-mailed credit card authorizations cannot be accepted.

Authorizations will be accepted by fax, phone, or in person only.

FAX # 403-277-3066

PROPERTY LOCATION:

Permit # _____

Property address: _____

APPLICANT/OWNER INFORMATION:

Contact name: _____

Contact number: _____

E-mail: _____

I, _____, authorize Rocky View County
(please print name)

To charge my Visa/MasterCard in the amount of \$ _____.

This charge is for: _____.
(application fee, extension fee, etc.)

My Visa/MasterCard # number is: _____.

The expiry date is: _____.

Signature

Name (please print name)

Dated this _____ day of _____, 20 _____.