## **CLACKAMAS COUNTY CREDIT CARD AUTHORIZATION SHEET**

CLACKAMAS		Date:
COUNTY		
<b>County Surveyor</b>		From:
Plats, surveys, etc.		
Phone: 503.742.4475		Phone:
Email: <u>surveyor@clackamas</u>	<u>.us</u>	
https://www.clackamas.us/s	survevor	Number of Pages (Including Cover):
necps.//www.ciackamas.as/	<u> </u>	
PLEASE TYPE OR PRINT LEGIBLY.		
NAME AS IT APPEARS ON CARD:		
CONTACT PHONE #:		
CONTACT FRANK.		
CONTACT EMAIL:		
CREDIT CARD NUMBER*:		
CARD EXPIRATION DATE:		
3-DIGIT SECURITY CODE* (CVVS   CVC2   CID See reverse side of credit card):		
BILLING ADDRESS*:		
CITY	CTATE	710.0005*
CITY:	STATE:	ZIP CODE*:
AUTHORIZED SIGNATURE:		DATE:
I authorize Clackamas County to charge the credit card indicated above for the permits I am applying for. I certify that		
I am an authorized user of this credit card and that I will not dispute the payment with my credit card company, so long		
as the transaction corresponds to the terms indicated on my request. I understand that Clackamas County's vendor charges a service fee for the use of a credit/debit card and authorize the additional charge to my account.		
s.ia. goo a corvido foo for the doo	c. a orogiv gobit oard aria	. additional only go to my account.
PROJECT NAME/NUMBER:		
MAP/TAX LOT:		

AFTER REMOVING SECURE DATA\*, DOCUMENT WILL BE STORED FOR 60-DAYS AFTER PROCESSING CARD.