



City of Newport Beach
COMMUNITY DEVELOPMENT DEPT
100 Civic Center Dr.
Newport Beach, CA 92660
949-718-1888

Credit Card Authorization Form

Authorized by: _____

**Use this form to authorize credit card payment for the City of Newport Beach,
Community Development Department**

ACCOUNT NUMBER (if applicable): _____

Reason for payment: _____

Authorized amount to be charged: \$ _____

PLEASE PRINT

Name (as it appears on card)			Email	
Billing Address for Card				
City	State	Zip Code	Telephone Number	Fax #
Authorized Cardholder Signature				Date

<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DISCOVER	
ACCOUNT NUMBER: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
EXPIRATION DATE: □ □ / □ □	CVC Code: □ □ □