

This Credit Card Authorization form authorizes the Regional District of Nanaimo (RDN) to charge the appropriate fee for the release of products and/or services to the credit card account given below.

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| | Permit Fee | | Archived Records Request |
|--|------------|--|--------------------------|

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|--------------------------------|--|
| Permit Number: (if applicable) | |
| FOR Address: | |
| Amount Payable: | |

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|--|----------------------------|
| Payee authorizes processing fee of 2.5% (subject to change without notice) | |
| VISA | MASTERCARD |
| Credit Card Number: | |
| Card Expiry Date: | 3 Digit Verification Code: |
| Company Name: | |
| Name on Card: | |
| Phone: | Email: |
| Postal Code: | Authorizing Signature: |