



CITY OF OREGON CITY

Building Division
698 Warner Parrott Road
Oregon City, OR 97045
Phone: (503) 722-3789
Fax: (503) 722-3880

CREDIT CARD AUTHORIZATION

Permit Number: _____

Site Address: _____

Visa / Mastercard Number: _____

Expiration Date: _____

Zip Code of Billing Address: _____ CCV2 # _____

Contact Name: _____

Contact Phone Number: _____

Fax Number: _____

If fees are incorrectly figured on the application, do you authorize us to run your card for the correct amount automatically up to a \$20 difference? (A receipt is always sent back with your permit.)

Yes

No

I hereby give the City of Oregon City permission to pay for the above permit with the credit card number given.

Signature: _____

Date: _____

THIS DOCUMENT WILL BE DESTROYED AFTER YOUR PERMIT
IS PROCESSED. WE DO NOT KEEP THEM ON FILE
