

**DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT
CREDIT CARD AUTHORIZATION FACSIMILE SHEET**



**Septic & Onsite Wastewater Systems
Program**

Phone: 503.742.4740

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Email: soilsconcern@clackamas.us

From:

Date:

Phone:

Fax:

Number of Pages (Including Cover):

PLEASE TYPE OR PRINT LEGIBLY.

NAME AS IT APPEARS ON CARD:

CONTACT PHONE #:

CONTACT EMAIL:

CREDIT CARD NUMBER*:

CARD EXPIRATION DATE:

3-DIGIT SECURITY CODE* (CVVS | CVC2 | CID -- See reverse side of credit card):

BILLING ADDRESS*:

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.

ADDRESS OF WORK PERMITTED:

STATE:

ZIP CODE:

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

Address:

CLACKAMAS COUNTY SEPTIC & ONSITE WASTEWATER SYSTEMS PROGRAM

150 Beaver Creek Road

Oregon City, OR 97045

Telephone Number: 503-742-4740

Hours:

Regular Business Hours:

Monday thru Friday

8:00 a.m. - 3:00 p.m.

Beginning January 1, 2016, credit/debit card transactions are subject to vendor service fee of approximately 2.5%.