



Department of Development Services  
205 Lawrence Street  
Marietta, Georgia 30060  
Brian Binzer, AICP, Director

## Bank Card Transaction Form

Name on Card: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**Please Fill In The Following Information:**

Type of Card: VISA                      MASTERCARD                      DISCOVER

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Total Amount of Permit(s): \_\_\_\_\_

Permit Number(s): \_\_\_\_\_

**This form must be filled out and accompanied by a picture ID and Driver's License.**

Mailing Address For Cardholder Including Zip Code:

\_\_\_\_\_  
\_\_\_\_\_

Three Digit Code on Back of Card: \_\_\_\_\_