



KING CITY

Oregon

Bank or Credit Card Authorization

Today's Date: _____

Amount of Charge: _____

Permit/Job Address: _____

VISA or Mastercard

Card Number: _____

Expiration Date: _____

CVV _____

Authorized Signature: _____

Phone Number: _____

Purpose of Charge:

This document will be destroyed after your permit is processed

King City City Hall
15300 SW 116th Ave.
King City, OR 97224
Phone: 503-639-4082 Fax: 503-639-3771