CUMBERLAND COUNTY PLANNING AND INSPECTION DEPARTMENT PO DRAWER 1829 FAYETTEVILLE, NC 28302 (910)321-6636 FAX (910)321-6637

CREDIT CARD INFORMATION

The information below must be completed for individuals wishing to mail or fax applications and utilize their credit card to pay the associated fees.

COMPANY NAME:		
NAME ON CREDIT CARD:		
ACCOUNT #:	VISA	M/C
EXPIRATION DATE:	_ V CODE (3 digits on back of card)	
BILLING ADDRESS IF DIFFERENT THAN MAILING ADDRESS:		
Street		
City/State/Zip		
It is understood that I may submit applications by mail or fax and have the fees charged to my credit card. It is further understood, that if the fee calculated by me is not correct, the corrected fee will be charged. I understand that I am responsible for updating this information with the Planning and Inspection Department if there are any changes. I may also withdraw this information at any time.		
Card Holder Signature:	Dat	te:
Printed Name:	Phone #:	
Address:		
City/State/Zip:		