



Planning Department
Permit Service Center

Please FAX or EMAIL
completed form to:
Berkeley Film Office
FAX (510) 644-2052
email: film@visitberkeley.com

City of Berkeley
2120 Milvia St.
Berkeley, CA 94704
Tel: 510 981-7500
Fax: 510 981-7505

Credit Card Authorization Form

CARD HOLDER INFORMATION		
Name on Credit Card: _____		
Card Holder Billing Address: _____		
City: _____	State: _____	Zip: _____
Telephone: _____	Email Address: _____	

PAYMENT AUTHORIZATION		
Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard		
Card Number: _____		Exp. Date: _____
Card Identification Number (CVV2 Code): _____ (Visa & MasterCard: 3 digits on back)		
Date: _____	Application No: _____	Project Address: _____
I, _____ authorize the City of Berkeley to process a charge against my credit card account in the amount of \$ _____ for the payment of _____		

Telephone Number: _____	Fax Number: _____	
_____	_____	_____
Print Name as it appears on Credit Card: _____	Signature: _____	Date: _____
<p>➤ Note: The City of Berkeley does not keep a file of Credit Card numbers. At the completion of the transaction, this document with your credit card number will be shredded.</p>		