

GARDEN CITY
CREDIT CARD FORM

All Cards Accepted

Card Type: _____

Card Number: _____

Name on Card: _____

Expiration Date: _____

CVV Code: _____

(3 digit code on back or 4 digit code on front for American Express)

Business Name: _____

Contact Name: _____

Phone Number: _____

Amount authorized to charge: _\$ _____

Application Number/permit number: _____

(provide information above so payment is applied correctly)