



# CREDIT CARD AUTHORIZATION FAX PERMITS AND INTERNET PERMITS

**City of San Ramon**  
Building & Safety Services Department  
2401 Crow Canyon Rd.  
San Ramon, CA 94583  
Phone: (925) 973-2580 Fax: (925) 838-282

I, \_\_\_\_\_ authorize the City of San Ramon to accept any of the below signatures on a permit application in lieu of an in-person signature. I hereby certify that I comply with all declarations and agreements on the permit application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_ authorize the City of San Ramon to charge to the credit card(s) listed below the fees associated with permits applied for in the company name by the below listed employees.

\_\_\_\_\_  
Credit Card Number      American Express      Visa      MasterCard      \_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Backup Credit Card Number      American Express      Visa      MasterCard      \_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Name on Credit Card(s)      \_\_\_\_\_  
Signature

The following employees have my permission to apply for construction permits and to use the above credit card(s) to obtain construction permits in the company name.

\_\_\_\_\_  
Employee Name      \_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Employee Name      \_\_\_\_\_  
Employee Signature

### Contractor Information

\_\_\_\_\_  
Contractor's Name      \_\_\_\_\_  
Company Name

\_\_\_\_\_  
Phone Number      Fax Number      \_\_\_\_\_  
Company Address

\_\_\_\_\_  
Contractor's State License No.      \_\_\_\_\_  
Class      Expiration Date

### Office Use Only:

Drivers License: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

APPLICATION APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_