

City of Osseo

415 Central Avenue Osseo, MN 55369-1195 P 763.425.2624 F 763.425.1111

WE ACCEPT MASTERCARD, VISA, DISCOVER and AMERICAN EXPRESS

Notice: Faxed applications will not be processed without payment by credit card

City of Osseo FAX: (763) 425-1111

Under Minnesota law, the information provided on this form is considered public and is available to anyone, except for the following:

The information regarding your credit card is private and will be provided only to you and to those people necessary to process your payment. This includes city employees who process your payment and employees of applicable financial institutions. You are not required to provide your credit card information if you want to pay by another method. However, if you choose to pay by credit card, you must provide your credit card information to pay the appropriate fee. Otherwise, your application will not be processed. By submitting this form, you authorize the City of Osseo to initiate payment on your credit card.

| To Pay by Credit Card | Name | Da | Date | |
|--|---|-----------------------------------|---------------------------|--|
| | Billing Address | | | |
| | City | | | |
| MasterCard | Daytime phone | | | |
| Visa or Discover | Signature | | | |
| | I authorize the City | of Osseo to debit my credit ca | ard in the box below | |
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| redit card information pplication for referen | n is to be processed immediately upon red | ceipt and destroyed. The top sect | ion is to be kept with th | |
| ppileation for referen | | | | |
| <u>The i</u> | <u>nformation below will be destro</u> | oyed after the payment is | s processed. | |
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| | | | | |
| Nam | e as it appears on card: | | | |
| Nam | o do it appears on cara. | | | |
| Acco | unt Number: | | | |
| Expir | ation Date / | 3-digit code | | |

Year

Month