



**Marion County
Board of County Commissioners**

Building Safety

2710 E. Silver Springs Blvd.
Ocala, FL 34470
Phone: 352-438-2400

Credit Card Payment Form

Date: _____

Permit#: _____ Certificate# _____ Escrow # _____

AMERICAN EXPRESS **DISCOVER** **MASTER CARD** **VISA**

Card number: _____

Expiration Date: _____ Security Code (back of card) _____

Name On Card: _____

Address of Card Holder: _____

Zip Code of Card Holder: _____

Phone #: _____

Fax number or email address you would like your receipt sent to: _____

Amount to be processed: _____

I hereby authorize the Marion County Building Department to charge the amount shown to the card listed above

Authorized Card Holder Signature:

Service Representative Signature:

Please note that Impact Fees **cannot** be paid by credit card
Credit card payments **cannot** be used to replenish escrow/debit accounts over