Eighth Avenue Place

Credit Card Authorization

PARKING VALIDATION TICKET PAYMENT

Please provide the following information:

1.

Ticket Value	Number Requested	Cost
$2.00		
$5.00		
$10.00		
$15.00		
$20.00		
$25.00		
Total		

2. Credit Card Types (circle one): VISA MASTERCARD AMERICAN EXPRESS

3. Credit Card Number: | | | | | | | | | | | | | | | | |

2a. Card Verification Code: ___ ___ ___ (three digit code on back of credit card)

4. Name (as it appears on the credit card) _____

5. Address Line 1 _____

6. Address Line 2 _____

7. CITY _____

8. PROVINCE _____Postal Code_____

9. EXPIRATION DATE: MONTH ___ ___ YEAR ___ ___ ___ ___

10. I _____ (print name), hereby authorize the management of the parkade at Eighth Avenue Place to automatically debit the amount of $ _____ on a one-time basis with the debit to take place on or before the following date: _____.

_____

(SIGNATURE)

_____

(DATE)