

City of La Vista
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La Vista, NE 68128
CityofLaVista.org
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One-Time Credit Card Authorization Form



Complete and sign this form to authorize the City of La Vista to make a one-time deduction from your credit card listed below. By signing this form, you give the City of La Vista permission to debit your account detailed below for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account. Upon completion of the transaction, this form will be shredded.

Please complete the information below:

I _____ authorize City of La Vista to charge my credit card account
(full name)

indicated below for _____ on or after _____.
(amount in dollars) (date)

This payment is for _____.
(description of goods or service)

Billing Information

Billing Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ E-mail: _____

Card Information

Card Type: Visa Mastercard Discover American Express

Cardholder Name: _____

Account Number: _____

Expiration Date: _____ CVV2 Code: _____

The City of La Vista will only accept credit card payments by the following methods: in person, via fax, or via physical mail. E-mailed authorization forms will not be accepted.

All credit card transactions with the City of La Vista have the following convenience fees: 3% of the transaction amount or \$2 minimum, whichever is greater.

Signature: _____ Date: _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the items outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one-time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company, so long as the transaction corresponds to the terms indicated in this form.