



City of Sarasota Building Department  
1565 1st St, Sarasota, FL 34236

## Credit Card on File Form

I, \_\_\_\_\_ hereby authorize the City of Sarasota Building Department to keep my credit card number on file and to use that number to pay any fees associated with my permit.

I also understand that I must fax over the Re-inspection and Additional Fee by Fax form with the permit number and address of the job. You must check the box indicating using the credit card kept on file.

Contractor \_\_\_\_\_  
Signature of Contractor

Printed name of Contractor \_\_\_\_\_

MasterCard Acct # \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Exp. Date. \_\_\_\_ V code # \_\_\_\_\_

Visa Acct # \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Exp. Date \_\_\_\_ V code # \_\_\_\_\_

American Express Acct# \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Exp. Date \_\_\_\_ V code # \_\_\_\_\_

Discover Acct # \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Exp. Date \_\_\_\_ V code # \_\_\_\_\_

Billing address of card: \_\_\_\_\_ Zip Code of card: \_\_\_\_\_

**YOU MUST CALL IN YOUR REQUEST TO SET UP THE  
REINSPECTION OR ADDITIONAL INSPECTION TO 941-954-4126  
AFTER OUR DEPARTMENT HAS RECEIVED AND PROCESSED YOUR PAYMENT FAX.**