

BOARD OF COUNTY COMMISSIONERS



UTILITIES DEPARTMENT

Please fill out the following Credit Card Agreement to give St Lucie County Utilities authorization to automatically debit your credit card for monthly Utility charges and services. Your credit card will be processed on the due date or on the first business day after the due date and a convenience fee of \$2.25 for processing your card monthly. Due to the new RED FLAG procedures this office needs to have this agreement in order to continue charging your credit card monthly if you are already set up or if you are a new applicant. We also accept debit cards if they are issued by your bank and they have the MasterCard or Visa insignia on the face of the card.

Visa: _____ MasterCard: _____

Utility Account Number: _____

Name on the Account: _____

Bank Name or Credit Card: _____

Bank Phone Number of Credit Card: _____

Credit Card Number: _____

Expiration Date on Credit Card: _____ / _____

CVC2 (Three-digit code on back of the card): _____

Maximum Cap Amount to be charged: _____

Billing Address of Credit Card Holder: _____

Phone Number of Credit Card Holder: _____

Authorize this information to be kept on file for future use Yes _____ No _____

I authorize St. Lucie County Utilities, 2300 Virginia Avenue, Ft Pierce, FL 34982 to charge my credit/debit card for my monthly utility bill and or services upon my signature. If St. Lucie County Utilities is unable to process my payment, I will be responsible for all alternate payment arrangements and any late fee incurred.

By signing this authorization, I acknowledge that I have read and agree to all of the above. All information given is complete and accurate.

Signature of Card Holder: _____

Printed Name of Card Holder: _____ Date: _____

2300 Virginia Avenue • Fort Pierce, FL 34982 • Phone (772) 462-1150 • FAX (772) 462-1153

Website: www.stlucieco.gov