

CREDIT CARD AUTHORISATION

Type of credit card (please tick ✓)

Mastercard

Visa

Card no:

Expiry date

Amount \$

I hereby authorise Wellington Parking and Infringement Services to charge my credit card on this occasion only.

Cardholder's name

Cardholder's signature

FOR OFFICE USE ONLY

Application approved

Yes/No

Permit number

.....

Letter sent

Yes/No

Receipt number

.....

Date

.....

Date

.....