

## Perkasie Regional Authority 150 Ridge Road, Sellersville, PA 18960-

## Recurring Credit Card Payments Sign-Up Form

## **CUSTOMER INFORMATION** Name:\_\_\_\_\_ Account No: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone No: \_\_\_\_\_ **CREDIT CARD INFORMATION** Credit Card Number: \_\_\_\_\_ Credit Card Type: \_\_\_\_\_ Security Code: Expiration Date: \_\_\_\_\_ Name on Account: Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ I certify that the information above is correct, that I am an authorized signer or designate of the account provided for credit card transactions, and that I am authorized to provide this information. I authorize Perkasie Regional Authority to deduct my utility payments from this account via Recurring Credit Card Payment transactions. I understand sending a written notification to Perkasie Regional Authority will revoke this authorization. Perkasie Regional Authority reserves the right to cancel Recurring Credit Card Payments due to insufficent funds without notice. Print Authorized Name Authorized Signature Date