



• Please send completed authorization to the Regional District of Fraser-Fort George by email to [building@rdffg.bc.ca](mailto:building@rdffg.bc.ca) or drop off at 155 George Street, Prince George BC, V2L 1P8

APPLICATION TYPE: \_\_\_\_\_

NAME OF OWNER/  
CORPORATION: \_\_\_\_\_

ADDRESS/ LEGAL  
DESCRIPTION: \_\_\_\_\_

**PART 2 – Payment Details**

PAYMENT AMOUNT: \_\_\_\_\_ PAYMENT DATE: \_\_\_\_\_

PAYEE PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PART 3 – Authorization**

**Signature**

I, the undersigned, authorize the Regional District of Fraser-Fort George to process the payment(s) as outlined in "PART 2 – Payment Details" using the credit card outlined in "PART 4 – Credit Card Information".

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Signature (MUST be signature of cardholder)*      *Print Name*      *Date Signed: (YYYY/MM/DD)*

**OFFICE USE ONLY**

Description #	Amount	Customer's Name	Authorization #

Date: \_\_\_\_\_

Project Type: \_\_\_\_\_

**PART 4 – Credit Card Information** *(Regional District to securely dispose of after processing)*

Name on Card: \_\_\_\_\_

Card Type:  VISA     MASTERCARD     AMEX     DISCOVER      Expiry Date: \_\_\_\_\_

Card #: \_\_\_\_\_      CVV: \_\_\_\_\_      Postal Code: \_\_\_\_\_

**Freedom of Information and Protection of Privacy Act (FOIPPA)**

The information collected on this Authorization will only be used for the purposes of the processing payment as outlined in this Authorization. This information is collected and managed in strict accordance with the FOIPPA. For any questions regarding the collection or distribution of this information, please contact General Manager of Legislative and Corporate Services [foi@rdffg.bc.ca](mailto:foi@rdffg.bc.ca) or (250) 960-4400.