

# CREDIT CARD AUTHORISATION

## CUSTOMER DETAILS

Cardholders name <i>(On credit card)</i>	
Business name <i>(On credit card)</i>	
Postal Address	
Email Address	
Contact phone number (Business Hours)	

*Please note: In the event that a refund is required, the credit card holder will receive the refund*

## CREDIT CARD INFORMATION

Cardholders Name			
Type of Card	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard		
Card Number	____ / ____ / ____ / ____	Expiry Date	____ / ____
Amount	\$		
Signature		Date	

## REASON FOR PAYMENT

Please include relevant reference/application/invoice numbers or attach separately (If applicable)


## PRIVACY STATEMENT

### Important Notice

Scenic Rim Regional Council is collecting your personal information in order to process your request. The information will only be accessed by Scenic Rim Regional Council for Council business related activities. Your information is handled in accordance with the *Information Privacy Act 2009* and will not be given to any other person or agency unless you have given permission or we are required by law.

## TO SUBMIT YOUR FORM TO COUNCIL

By Mail	Scenic Rim Regional Council PO Box 25, BEAUDESERT QLD 4285		
By E-Mail	<a href="mailto:mail@scenicrim.qld.gov.au">mail@scenicrim.qld.gov.au</a>		
In Person	Beaudesert Customer Service Centre 82 Brisbane Street, Beaudesert  Boonah Customer Service Centre 70 High Street, Boonah  Tamborine Mountain Library & Customer Service Cnr Main St & Yuulong Rd, Tamborine Mountain		
Phone	(07) 5540 5111	Fax	(07) 5540 5103