



Chandler Heights Citrus Irrigation District
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Chandler Heights AZ 85127
Office 480.988.2731
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chcid@chcid.org

Office Hours – Monday through Friday 9am -5pm

Credit Card Payment Authorization Form

Please complete the information below:

I _____ authorize Chandler Heights Citrus Irrigation District to charge my credit card for the amounts invoiced.

Customer Name: _____

Billing Address _____ Phone # _____

City, State, Zip _____ Email _____

Account Type: Visa

MasterCard

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3 digit number on back of Visa/MC) _____

SIGNATURE _____ DATE _____

CHCID will ONLY charge credit card when a customer contacts the office to authorize payment. CHCID will not charge credit card automatically under any circumstances.

As the credit card holder, I also authorize Chandler Heights Citrus Irrigation District (CHCID) to charge my credit card for future purchases verbally (or written) approved by me.

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. CHCID will keep all information entered on this form strictly confidential.