

ALABAMA PLUMBERS AND GAS FITTERS EXAMINING BOARD
11 W. OXMOOR RD., SUITE 104
BIRMINGHAM, AL 35209
PHONE: 205-945-4857
FAX: 205-945-9915
WWW.PGFB.ALABAMA.GOV

Credit Card Authorization Form

CARDHOLDER INFORMATION

Name: _____

Billing Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

CERTIFICATE HOLDER INFORMATION

Name: _____ Social Security #:XXX-XX-_____

Home Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

PAYMENT AUTHORIZATION

I _____ authorize the Alabama Plumbers & Gas Fitters Examining Board to process a one-time charge against my credit card account in the amount of \$_____ for the payment of:

Certification - Classification: _____

Exam - Classification: _____

Other - Specify: _____

CREDIT CARD INFORMATION

Credit Card type: Visa Mastercard

Number: _____

Expiration Month: _____ Expiration Year: _____

Cardholder Signature X _____ Date _____/_____/_____

Security Code: _____