

SOFT ACCOUNT APPLICATION

**COMPLETED FORMS CAN ONLY BE ACCEPTED THROUGH HAND DELIVERY OR U.S. MAIL
DO NOT SAVE THIS FORM TO A COMPUTER OR OTHER DEVICE.**

757 Carolyn Avenue, Columbus, Ohio 43224 • Phone: (614) 645-6090

SIGNATURE ON FILE TRANSACTION

Company Name _____ Telephone Number/Ext. _____

Street Address _____ Fax Number _____

City/State/Zip Code _____ Email Address _____

Is this an update to an existing SOFT account? YES NO **If YES, provide SOFT account #** _____

APPLICANT NAME _____ TITLE _____

CREDIT CARD# _____ - _____ - _____

TYPE OF CARD VISA MASTERCARD DISCOVER EXP. DATE _____

CARDHOLDER NAME _____

CARDHOLDER ADDRESS _____

BILLING ADDRESS _____

Please list up to four (4) authorized signers in addition to applicant. Only persons listed on this form with signatures attached shall be authorized to sign permit applications for payment processing.

#1 NAME _____ SIGNATURE _____

#2 NAME _____ SIGNATURE _____

#3 NAME _____ SIGNATURE _____

#4 NAME _____ SIGNATURE _____

SIGNATURE ON FILE TRANSACTION ACCOUNTS EXIST FOR THE CONVENIENCE OF THE ACCOUNT APPLICANT. THE SIGNATURES THAT APPEAR ON THIS APPLICATION SHALL HAVE THE POWER TO CAUSE A DEBIT AGAINST THE CREDIT CARD LISTED FOR THE PROCESSING OF FEES DUE TO THE CITY. ALL RISK OF LOSS IS TO BE BORNE BY THE APPLICANT. IN THE EVENT AN AUTHORIZED SIGNATORY BECOMES NO LONGER ASSOCIATED WITH THE BUSINESS AND/OR THE DATE OF THE CREDIT CARD ON FILE BECOMES EXPIRED, IT SHALL BE THE RESPONSIBILITY OF THE APPLICANT TO IMMEDIATELY NOTIFY IN WRITING THE CITY OF COLUMBUS, BUSINESS MANAGER OF THE CUSTOMER SERVICE SECTION, DEPARTMENT OF BUILDING AND ZONING SERVICES, 757 CAROLYN AVE., COLUMBUS, OH 43224.

APPLICANT SIGNATURE & POSITION HELD IN COMPANY _____

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Signature of Notary Public _____ My Commission Expires _____

Notary Seal Here

OFFICE USE ONLY

ACCOUNT # _____

APPLICANT PIN _____ PIN #1 _____ PIN #2 _____ PIN #3 _____ PIN #4 _____

If you have questions regarding this form, please call (614) 645-6090. Incomplete or illegible information shall result in rejection of application.

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