



CREDIT CARD AUTHORIZATION FORM

Idaho Division of Occupational & Professional Licenses
11341 W Chinden Blvd, Bldg #4
Boise, ID 83714
Phone: 208-334-3950
Email: customer-service@dopl.idaho.gov

I, _____, authorize The State of Idaho Division of Occupational & Professional Licenses to charge my credit/debit card account in the amount of \$ _____. Please note there is an additional 3% charge for the use of your card through Access Idaho

This payment is for:

- | | |
|---|--|
| <input type="checkbox"/> License/Registration Application Fee | <input type="checkbox"/> License Renewal Fee |
| <input type="checkbox"/> New Permit Fee | License Number: _____ |
| <input type="checkbox"/> New License Fee | <input type="checkbox"/> Notice of Violation (NOV) Fee |
| <input type="checkbox"/> Fee Due on Existing Permit | Case Number: _____ |
| Permit Number: _____ | <input type="checkbox"/> Other: _____ |

Credit Card Number:

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Expiration Date:

	/	
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CVC:

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Billing Address Zip Code:

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Cardholder Signature

Date

Phone Number

Email Address for Receipt