



**Stan Colie Nichols**  
 Tax Collector - Santa Rosa County  
 6495 Caroline Street Suite E  
 Milton FL 32570



PH: 850.983.1800 FAX: 850.623.8655

### Electronic check/ Credit Card Authorization Form

Please complete the information in the box below to authorize an **electronic check** payment (ACH-debit).

***\*Under penalty of perjury I, \_\_\_\_\_ hereby authorize the Santa Rosa County Tax Collector's Office to charge \$ \_\_\_\_\_ on my below payment type:***

Name on check: \_\_\_\_\_

Address: \_\_\_\_\_

Bank Routing number: \_\_\_\_\_

Type of Account:  Checking  Savings

Bank Account Number: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Email address for electronic receipt (optional) \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

### Credit/Debit

Please complete the information in the box below to authorize a credit/debit card transaction. Please note there will be a 2.5% convenience fee.

Card Holder Name: \_\_\_\_\_

Card Holder address: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV \_\_\_\_\_

Email address for electronic receipt (optional): \_\_\_\_\_

Signature: \_\_\_\_\_

