



SOLID WASTE DEPARTMENT

5887 S Taft Hill Road  
Fort Collins, Colorado 80526  
(970) 498-5760  
Fax: (970) 498-5780

Credit Card Authorization Form

I hereby authorize the Larimer County Landfill to charge landfill fees to the following credit card issued in my name:

Company Name \_\_\_\_\_

Will another company be hauling for you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please indicate all haulers authorized to charge fees to your credit card:

\_\_\_\_\_

Card Type: Visa, Master Card, American Express , Discover  
(Circle one)

Name on card \_\_\_\_\_  
(print)

Phone Number \_\_\_\_\_

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

Card expiration \_\_\_\_\_ Card code \_\_\_\_\_

Signature on card \_\_\_\_\_  
(please sign)

Larimer County Solid Waste has my approval to use this credit card on the following dates:

Date: \_\_\_\_\_ until Date: \_\_\_\_\_

*Note: If project extends beyond the above mentioned date a new form will have to be completed.*

Special Instructions:

\_\_\_\_\_  
\_\_\_\_\_