



Coyote Point Marina

1900 Coyote Point Drive, San Mateo, CA 94401
(650) 573-2594 ♦ marina@smcgov.org



Recurring Credit/Debit Card Payment Authorization

I, _____, hereby authorize the County of San Mateo to initiate debit entries to my credit or debit card as provided below. I understand that I will be charged the current outstanding balance on my Coyote Point Marina account at the time of the transaction. I understand that no prior notification will be provided and that my card will be charged/debited on the 10th day of each month.

Billing Information:

Name on card _____

Billing Address _____

City, State, Zip _____ Phone # _____

Email _____

Card Details

Visa MasterCard Last four digits of card number: ____ ____ ____ ____

Do not write the full card number. Please contact the office to provide full card information

I understand that this authorization will remain in effect unless and until I withdraw such authorization by providing written notice thereof to **Coyote Point Marina** at least 15 days prior to the next billing date. I further agree to provide written notification to the Marina of any changes in my account information, and that my failure to do so may result in late fees/penalties in accordance with my Berth License Agreement if it affects the Marina's ability to timely process my monthly payment. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I certify that I am an authorized user of this credit or debit card and will not dispute these scheduled transactions so long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE _____ **DATE** _____