



CREDIT CARD PAYMENT AUTHORISATION

Section 1 Application Details

Office of the Commissioner for Body Corporate and Community Management

GPO Box 1049
Brisbane QLD 4001
Tel. (07) 3227 7654 Fax: (07) 3227 8023

I authorise the Office of the Commissioner for Body Corporate and Community Management to accept credit card payment for the following:

Applicant Name

Contact Tel. No

Name of Scheme

Application Reference No. (if applicable)

Amount of fee:
\$

The fee is for:

- Dispute Resolution Application Fee.
- s246 Copies of documents.
- Search of Adjudicator Orders.
- Other (If 'other' please specify)

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Section 2 Payment Details

Credit Card Payment

Charge my:

- Mastercard
- VISA
- Bankcard

Credit Card No.

Cardholder's Name

Amount Authorised \$ Expiry Date

Signature

Date / /

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