

WATERMARK
APPRAISAL GROUP^{INC}

Credit Card Approval Form

All information **must be completed to process**

Name on Card: _____

Billing Address of Card: _____

Billing Phone Number: (_____) _____

Appraised Property Address: _____

Card Number: _____

Expiration Date: ____/____/____

Type of Card (circle one)



Amount Authorized: \$ _____

Signature of Card Owner: _____

Date: ____/____/____