555 Wright Way
Carson City, NV 89711
Reno/Carson City (775) 684-4368
Las Vegas area (702) 486-4368
dmv.nv.gov

PAYMENT AUTHORIZATION FORM

DO NOT EMAIL FORM

Debit or Credit Card Number (One number per box)

				-					-					-				

Payment Type: ☐ Master Card ☐ Visa ☐ Discover Card

Expiration Date

		/		

Month Year

Cardholder Information

Printed Name: _____
Print your name as it appears on your card

Payment Amount (Required): _____
Pursuant to NRS 353.1467, credit card payments of $10,000 or more are not permitted and cannot be split between multiple payments and/or card types

Cardholder Billing Address: _____
Street Address or P.O. Box City State Zip Code

License Plate # / Driver License # / Business License # / Records# / NV Motor Carrier Account # of the transaction being processed: _____ Telephone: _____

Authorized Signature: _____ Date: _____

By signing this form, you give the DMV permission to debit your account for the payment amount on or after the indicated date.

I authorize the DMV to charge the credit/debit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the amount indicated above only and is valid for one-time use only. I certify that I am an authorized user of this credit/debit card and that I will not dispute the payment with my credit/debit card company so long as the transaction corresponds to the terms indicated in the form.

Do not e-mail this authorization form. E-mailed forms will not be processed. E-mail is NOT a secure form of transmittal to protect your card information.

Office Use Only

Super Tran ID: _____ Last four of card: _____ Technician Number: _____

Comments: _____