



**CITY OF WHITTIER HARBOR**

P.O. Box 639 Whittier, Alaska 99693  
Main: (907) 472-2327 X7 • Fax : (907) 472-2472  
Email: [harborfinance@whittieralaska.gov](mailto:harborfinance@whittieralaska.gov)

**Automatic Monthly Credit Card Agreement**

Vessel Owner(s): \_\_\_\_\_

Vessel Name(s): \_\_\_\_\_

Main phone: \_\_\_\_\_ Alt#: \_\_\_\_\_

**CREDIT CARD INFORMATION:**

Name as it appears on the front of the Credit Card: \_\_\_\_\_

Type of Card:  Visa  MasterCard  Discover  Amex

Credit Card # : \_\_\_\_\_

Expiration Date (MM/YY): \_\_\_\_\_ Security Code: \_\_\_\_\_

Unless otherwise advised in the Specified Charge Section below, the undersigned, hereby grants permission for the City of Whittier Boat Harbor to bill their credit card for all charges on their account. Charges will be billed monthly. The undersigned also agrees to promptly notify the Harbor of any issues arising affecting the monthly billing of their credit card, such as, but not limited to stolen card, closed account, etc.

Specified Charges: \_\_\_\_\_

**Please update credit card information in writing, in person, by mail or email. To discontinue the use of your card please notify Whittier Boat Harbor ASAP.**

Signature: \_\_\_\_\_

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

**OFFICE USE ONLY:**

COMPUTER UPDATE:  Yes  No

ENTERED BY: \_\_\_\_\_

NOTES: \_\_\_\_\_