



STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
BUREAU OF INSURANCE
 34 STATE HOUSE STATION AUGUSTA, MAINE 04333-0034

AUTHORIZATION OF CREDIT CARD PAYMENT



Fees owed to this Department may be paid by the use of a credit card. If you wish to pay your fee(s) with your credit card, please complete this form and send it with your paperwork. Payment through credit cards will not be processed without this authorization form. Please print or type clearly.

The mailing address listed below MUST be the billing address of the credit card account. If not, the transaction will decline.

Name (company/individual for whom payment is being made) (Please Include License # and SSN/FEIN):

Purpose of Payment:

Name of Cardholder:		Contact persons phone #, if questions with this form. Telephone #: () -
Email Address:		
Billing Address:		
City:	State:	Zip Code:

I authorize the State of Maine, Department of Professional and Financial Regulation, Bureau of Insurance to charge my:

Visa MasterCard Discover American Express

Expiration date: ___/___/___ in the amount of: \$ _____
 (Card number – Please print clearly)

Signature: _____ Date: ___/___/___
 (must be signed by authorized person to validate)

Form is available on our website: www.maine.gov/pfr/insurance/home You may fax the form to: 207-624-8599 or e-mail to: Insurance.pfr@maine.gov

OFFICES LOCATED AT 76 NORTHERN AVENUE, GARDINER, MAINE 04345
www.maine.gov/pfr/insurance/home

Phone: (207) 624-8475 (Office) Hearing Impaired: Please call Maine relay 711 Customer Complaint (800) 300-5000 Fax: (207) 624-8599
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