



# TOWN OF COEYMANS

## Justice Court

18 Russell Avenue  
Ravena, New York 12143

### Town Justices:

Thomas M. Frese  
Rocco P. Persico

Phone (518) 756-8480

Fax (518) 756-7730

Email [Coeymanstowncourt@nycourts.gov](mailto:Coeymanstowncourt@nycourts.gov)

## CREDIT CARD AUTHORIZATION

Please Print clearly and submit this entire form for processing.

Name: \_\_\_\_\_

Case Number/Ticket number: \_\_\_\_\_

Credit Card (check one): \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

Amount: \$ \_\_\_\_\_

Credit Cardholder Name: \_\_\_\_\_

(Print exactly as it appears on card)

\*Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV# \_\_\_\_\_ (3-digit code on back of card)

The Justice Court office is open daily between the hours of 8:30 A.M and 4:00P.M. You may appear in person or mail to the address above: a CERTIFIED CHECK or MONEY ORDER made payable to "Town of Coeymans Court", or the provided CREDIT CARD AUTHORIZATION FORM. A service fee of 2.99% of the payment amount will be assessed on all credit card payments. Payments may continue to be made by a cashier/certified check, or money order without the imposition of a service fee. Note that the municipality nor the court received any portion of the service fee.

\*NOTE: Should a bank reject your transaction, or you fail to submit all required information it will result in a default judgement being issued without further notice.

I hereby accept the fine, surcharge, civil and/or suspension fee amount(s) imposed by the Court and a **service fee of 2.99%** of the payment and authorize payment thereof on the above noted credit card.

\*\* Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*If other than the defendant, please submit a clear photocopy of a picture ID with signature. (i.e., Drivers License)