



**COMMUNITY DEVELOPMENT**

701 Laurel St.  
Menlo Park, CA 94025  
Tel 650-330-6704  
Fax 650-327-5403

**PROPERTY RECORD SEARCH**

**Search for Address:** \_\_\_\_\_

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

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

Company: \_\_\_\_\_

Mailing/Billing Address: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

When Record Search is ready, please:  Mail  Fax  Call for Pick up  
(Check all that apply.)

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For office use only below

Geologist Report on File? \_\_\_\_\_

Receipt # \_\_\_\_\_

Fee: **\$114.00** per hour with a **\$28.50** minimum charge. Any record search going over 15 minutes will be charged an additional **\$28.50** per every 15 minutes spent on the record search.

Processed By: \_\_\_\_\_

**Please fill out Credit Card  
Information Sheet on the second  
page of this form in order for us to  
process your record search**



CREDIT CARD PAYMENT AUTHORIZATION  
FOR CARD NOT PRESENT TRANSACTIONS

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Please circle the type of card to be charged: VISA    MASTERCARD

PLEASE PRINT CLEARLY

**ALL INFORMATION IS REQUIRED TO PROCESS PAYMENT**

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

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

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_

3-Digit Security Code: \_\_\_\_ (CVC located on back of card)

Cardholder Billing Address: \_\_\_\_\_ (Number & Street Name)

Cardholder Billing Zip Code: \_\_\_\_\_

Authorized Charge Amount: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

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For Office Use Only – Payment Processed by: \_\_\_\_\_

If customer requests that copy of credit card payment receipt be provided, print and send "Customer Copy" only. Do not provide a copy of original receipt or a copy of this form.

Attach original receipt below and place in document drawer. No copy of this form is to be made.

Attach Original Receipt Here
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