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CREDIT CARD SIGNATURE ON FILE AUTHORIZATION FORM

Account Type: Visa MasterCard AMEX Discover

Cardholder Name: _____

Company Name if Corporate Card: _____

Account Number: _____

Expiration Date: _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) : _____

THE FOLLOWING MUST BE COMPLETED BY THE CARDHOLDER FOR THE CREDIT CARD INDICATED ABOVE & SIGNED BY THE AUTHORIZED USER ONLY:

I _____ AUTHORIZE A1 LIMOUSINE SERVICE, COM .INC. TO PROCESS THE ABOVE CREDIT CARD AS "SIGNATURE ON FILE" FOR CHAUFFEURED TRANSPORTATION SERVICES. THE UNDERSIGNED HEREBY ACKNOWLEDGES AND AGREES THAT A1 LIMOUSINE SERVICE COM, INC. IS RELYING UPON THE WITHIN APPLICATION IN EXTENDING CHAUFFEURED TRANSPORTATION SERVICES TO THIS APPLICANT. ADDITIONALLY TO AVOID THE INCONVENIENCE TO EACH PASSENGER OF SIGNING CHARGE RECORDS AT THE CONCLUSION OF EACH TRANSFER , THE UNDERSIGNED HEREBY AUTHORIZES THE CREDIT CARD COMPANY TO PERMIT THIS APPLICATION TO SERVE AS MY AUTHORIZATION TO CHARGE THE ABOVE CREDIT CARD IN LIEU OF SIGNING INDIVIDUAL CHARGE RECORDS OR TRAVEL AND ENTERTAINMENT SALES SLIPS FOR EACH RENDERED SERVICE. I UNDERSTAND THESE CHARGES MAY INCLUDE BUT ARE NOT LIMITED TO ALL TOLLS, PARKING, WAITING TIME, STOPS, NO-SHOW, AND CANCELLATIONS; ALL CANCELLATIONS WILL INCUR A FULL FARE A "100%" CANCELLATION FEE. A1 LIMOUSINE SERVICE.COM, INC. IS NOT RESPONSIBLE FOR ARTICLES LEFT IN THE VEHICLE. CUSTOMER SHALL BE LIABLE FOR ANY DAMAGE(S) DUE TO NEGLIGENCE AND SHALL BE CHARGED ACCORDINGLEY FOR SUCH DAMAGES DETERMINED BY THE OWNER. A1 LIMOUSINE SERVICE COM, INC. HAS THE RIGHT TO TERMINATE A NY RUN AT THE DISCRETION OF THE DRIVER. THE UNDERSIGNED HERBY AUTHORIZES A1 LIMOUSINE SERVICE, COM INC. TO TRANSPORT THE PARTIES OF THE ABOVE REFERENCED BOOKING, AND ACKNOWLEDGES AND ACCEPTS FINANCIAL RESPONSIBILITY AGREEING TO THE CONDITION(S) AND TERM(S) AS SET FORTH.

PLEASE LIST ALL PERSONS AUTHORIZED TO CHARGE SERVICES TO THIS CARD

Name _____ **Title** _____ **Phone** _____

(COPY OF BOTH SIDES OF THE SIGNED CREDIT CARD & IDENTIFICATION CARD MUST BE SUBMITTED WITH THIS FORM)

EMAIL _____ TITLE _____ DATE _____

CARDHOLDER 'S NAME: (PLEASE PRINT) _____ **SIGNATURE:** _____