US Limo System INC. Account Application

☐ **Corporate** ☐ **Individual** ☐ **Travel Agent**

Applicant Name: _____

Company Name: _____ **FED I.D. # / SS#**_____
(If applicable)

Company Address:
Address: _____ City: _____ State: _____ Zip: _____

Billing

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Point Of Contact Name: _____E-mail Address: _____

Work Phone: _____Cell Phone _____ Fax: _____

Credit Card Information: ☐ **Amex** ☐ **Master Card** ☐ **Visa** ☐ **Discover**

Card Holder Name: _____CVV Code_____

Address #: _____ City: _____ State: _____ Zip: _____

Telephone # _____ Fax # _____

Credit Card ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ **Exp** ☐ ☐/☐ ☐

An attached copy of the Front and Back of the Credit Card must accompany this Application.

The undersigned hereby acknowledges and agrees to the terms and conditions published at http://www.uslimosystem.com/terms.html Additionally to avoid the inconvenience to each passenger of signing charge records at the conclusion of each trip, the undersigned herby 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. In the event of declined charges or default on any payment applicant and/or undersigned will be responsible of any overdue all outstanding balances including interest, collection and attorney fees.

Names and contact of personal authorized to request service (for additional names please attach a list)

_____

_____

_____

Print Name: _____ **Signature:**_____

Please Fax completed application to: **+1 516-327-5500** **Attention:** _____

Reservations +1 516-327-5466 Toll Free 1-877-860-5466

Reservations via email: info@uslimosystem.com website: www.uslimosystem.com