

Diamond Limousine

TEL/FAX 800-807-9101

2648 Coney Island Ave ,Brooklyn, NY,11223

www.diamonlimony.com

BUSINESS INFORMATION:

Legal Name of Business: _____

Doing business as: _____

Type of Business: _____

Date of Incorporation: _____ (if applicable)

State of Incorporation: _____

Federal Tax Identification Number: _____

E-Mail Address: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____ Business Fax: _____

Applicant Name: _____ Ext. _____

TERMS OF PAYMENT:

It is agreed that payments of invoices are due within 30 days from the date of each invoice. In the event of none payment, the below listed credit card will be charged for the balance owed.

Credit Card Type: ___ VISA ___ Master Card ___ AMEX

___ Discover ___ Diners

- Name on Card: _____
- Credit Card No. _____
- CVV: _____ Expiration Date: _____

NAMES OF PERSONNEL AUTHORIZED TO REQUEST SERVICE

Full Name _____ ext. _____

Full Name: _____ ext _____

Full Name _____ ext. _____

Full Name: _____ ext _____

Full Name _____ ext. _____

Full Name: _____ ext _____

(If needed, attach additional names of authorized personnel on your company letterhead)

TERMS AND CONDITIONS (Please review the below listed terms and conditions)

The below listed applicant hereby agrees to and accepts the following terms and conditions: FULL PAYMENT OF ALL INVOICES ARE DUE UPON RECEIPT OF STATEMENTS. Failure to make payment in full within 30 DAYS of any statement will automatically authorize Company to charge the credit card on file.

In the event that the account remains unpaid for any reason, Diamond Limousine may pursue legal action and will hold applicant and/or Company liable for all legal and other related expenses, including but not limited to attorney fees, court filing fees, and any other expenses incurred in the collection process.

The undersigned hereby confirms that cancellations of any reservation must be made within 24 hours for a full refund. Cancellation within 48 hours is subject to 20 % of the total balance due for the particular trip.

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AUTHORIZED SIGNATURE / TITLE

DATE