

NY ONE LIMO Account Application

212-888-9600 info@nyonelimo.com

☐ Corporate ☐ Individ	lual 🗌 Travel Agent Applicant Nam				
Common Name					
(If applicable)					
(Company) Address:		City: _		State:	Zip:
Billing Address:		City:	State	: Zip:	:
Telephone:	_EXT	Fax:	E-mail:		_
Point Of Contact Name: _		E-mail A	ddress:		
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					
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.nyonelimo.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.