

Credit Card Authorization Form – Limousine Service

I _____ of _____
(Your name) (Company name)
authorize New York Luxury Limousine Inc to charge my credit card for the sum of _____

I understand that this charge is non-refundable unless I pay cash or I comply with the terms and cancellation policy state below.

Hourly charters for all vehicle types that are cancelled 72 hours prior to job will be subject to a 50% charge of total fare. Hourly charters cancelled within 48 hours will be subject to full charge of total fare. Airport transfers for all vehicle types that are cancelled within 72 hours of job will be subject to full charge of the total fare. Specialty vehicles e.g. (buses, SUV's stretch and antique cars) providing proms, weddings or any hourly transportation service have a six months cancellation policy. Any damages to vehicles by passengers are the sole responsibility of the passengers. Our chauffeurs will assist but are not responsible for the customer's luggage. Customer is responsible to see that all pieces of luggage are loaded into vehicle. If you do not see your chauffeur, you must call our toll free number **1-800-228-3050** or the source of the reservation before making alternate arrangements or you will be charged full amount of reservation.

I understand that this reservation/charge for service to be render on _____ cannot be cancelled unless provided express notice is given by email to nyluxurylimo@aol.com and with the compliance of the terms and cancellation policy.

I authorize First NY Luxury Limousine Inc to charge my credit card for this reservation or reservations.

All charges will be applied to the given credit card, billed to account or cash to be collected on the day of service, depending on the term. If cash for the full amount is collected on the day of service, given credit card will not be charged. In the event that any extra hours are incurred, I authorize my credit card to be charge the extra amount of: _____

In the case/event of any damage to the rented vehicle, I will also be responsible for all expenses for repairs as well as lost revenue of the rented vehicle, while it is being repair. For this I also authorize my credit card to be charged.

CREDIT CARD TYPE: (Circle one) VISA MC AMEX DISCOVER

ACCOUNT NUMBER: _____

EXPIRATION: ____ / ____

CARD VERIFICATION NUMBER: _____



(On MasterCard or VISA
the three digits on the back
of the card.)



(On Amex the four
digits on the front of
the card.)

NAME AS IT APPEARS ON THE CARD: _____

CARDHOLDER SIGNATURE: _____

DRIVER LICENSE NUMBER AND STATE: _____

CREDIT CARD BILLING ADDRESS: _____

(Address , City, State, Zip)

PLEASE FAX BACK TO 718-251-7771