



CHICAGO A1

LIMOUSINE SERVICE

CORPORATE/PERSONAL ACCOUNT APPLICATION

PLEASE PRINT OR TYPE CLEARLY.

Company or Client Name: _____

Billing Address: _____

City: _____ State: _____ Zip code _____

Type of Business: Corp: _____ Partnership: _____ LLC: _____ Proprietorship: _____

Business Phone: _____ Cell Phone: _____

Business Fax: _____

Alt. Number: _____ Email: (required) _____

Primary Contact Person: _____ Dept. _____

Phone _____ Email: _____

Other Address (if different from Billing Address) _____

City: _____ State: _____ Zip Code: _____

CREDIT CARD INFORMATION:

Type: () VISA () MASTERCARD () AMEX () DISCOVER () DINER'S CLUB

CARD# _____ Exp. Date _____ 3/4 digit code: _____

Cardholder Signature: _____

Cardholder Name :(Please Print) _____ Date: _____

Cardholder Phone #: _____

NOTE: Credit Card information is required to guarantee payment for accounts.

Corporate Billing Information

Name on the Credit Card: _____

Credit Card Type: _____

Credit Card Number: _____

Expiration: _____

CVV Number (3-4 Digit code on the Back of the Card): _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

20% Gratuity and Service Charge: _____

Total Amount Due: _____

Deposit (25% of Total Amount Due)*: _____

*Deposits are not refundable

Corporate Account Information

Federal ID #: _____

Billing Preference:

____ Passenger Credit Card ____ Credit Card on File ____ Account:

Bank Reference:

Bank Name: _____

Account Number: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

Account Billing Period:

____ Weekly ____ 15 day billing ____ Monthly

PLEASE NOTE: ALL INVOICES ARE DUE UPON RECEIPT. BY SIGNING AND SUBMITTING THIS APPLICATION, YOU ARE AUTHORIZING CHICAGO A1 LIMOUSINE SERVICE, INC TO CHARGE THE CREDIT CARD ON FILE FOR SERVICES RENDERED: (A) AT THE COMPLETION OF EACH TRIP FOR "SIGNATURE ON FILE" SERVICE; OR (B) FOR CORPORATE A/R, AT THE EXPIRATION OF 5 BUSINESS DAYS AFTER THE LAST DAY OF THE SELECTED BILLING CYCLE FOR ANY UNPAID BALANCE AND FEES, WITH NO FURTHER SIGNATURES REQUIRED FOR SUCH CHARGE TO THE CREDIT CARD LISTED HEREIN.

ACCOUNT CONDITIONS:

1. Airport cancellations must be received at least 4 hrs prior to scheduled pick up time to avoid charge.
2. Charters and Special events must be canceled at least 1 week in advance to avoid charge.
3. A "No Show" (i.e., reservations not canceled properly) will be billed at corporate rate plus 20% gratuity.
4. Payment is due immediately after receipt of an invoice. Payments more than 30 days past due will be charged to the credit card under the guarantee information above and will include a 5% late fee.

Terms & Policies

1. A photo copy of driver's license of primary contact/account holder and credit card to be used on file is required for all accounts.
2. All cancellations require 3 hours notice prior to scheduled pick up, otherwise the trip fare will be charged in full.
3. All Online Reservations must be made at least 12 hours prior to the scheduled pick up time. Otherwise, you may call 1-888-5466-012 & 773-399-6666 to place your reservation.
4. Trip fares do not include airport taxes, applicable tolls, and fuel surcharge convenience fee if applicable
5. Standard Gratuity charge of 20% of trip fare will be applied for all trips.
6. A (No Show) fee equal to the trip fare will be charged for any passenger who fails to show up at the designated location. Please call 1-888-5466-012 or 773-399-6666 if you cannot locate your Chicago A1 Sedan or Limousine to avoid being charged the "No Show" fee.
7. A Holiday surcharge will apply to all fares for the following holidays: New Year's Eve, New Year's Day, Christmas Eve, Christmas Day, 4th of July, Memorial Day, Labor Day, and Thanksgiving Day.
8. Signature on File Accounts: the credit card on file will be charged upon the completion of each scheduled trip or multiple trips in a single day. This eliminates the extra task of presenting your credit card to the chauffeur on each trip. Customers are required to update credit card records prior to the expiration of any card on file.
9. There is no charge for the first 15 minutes of waiting time. Waiting time exceeding 15 minutes shall be billed at \$55/hour for sedans and \$80/hour for limousines.
10. Corporate A/R account billing: Any unpaid balance due after 5 business days of the last day of the billing cycle shall be charged to the credit card on file.
11. Early AM pickup charge of \$20.00 shall apply to all pickups after 12:00 am and before (5:00 a.m.)
12. Chicago A1 Limousine Service, INC, reserves the right to refuse service or make a reservation for any passenger who fails to supply a valid credit card for payment. In such cases, cash only will be acceptable.
13. Chicago A1 Limousine Service, INC, reserves the right to deny an account set up to any person, company, and or entity for any reason within its sole discretion.
14. Chicago A1 Limousine Service, INC, reserves the right to provide a replacement sedan or limousine of comparable quality in the event the specific vehicle requested is unavailable for reasons beyond control.
15. All rates are subject to change without notice.

CLIENT ACKNOWLEDGMENT AND AGREEMENT

Phone: (888) 546-6012 – Fax: (800) 359-1298 – Web: www.ChicagoA1.com - Email: info@chicagoA1.com

I, the undersigned, on behalf of the afore-listed Company and/or myself, acknowledge and agree to all of the Agreement terms and policies of Chicago A1 Limousine Service, INC, and further authorize Chicago A1 Limousine Service, INC, to charge the credit card listed herein for limousine services rendered as well as any cancellation, no show, overtime fees, waiting time fees, Holiday surcharges, and other applicable costs and fee as described herein and do not require any further signatures for such credit card payment. If applying for a corporate A/R account, I agree and authorize Chicago A1 Limousine Service, INC, to run a credit check on our company and to contact our credit references listed herein to assess the Company's credit worthiness. I further authorize and agree that interest fee of 2.00% per month and collection fees may be charged to our account on any overdue amounts. In the event that our Company default's on any payment, I authorize Chicago A1 Limousine Service, INC, to charge the credit card listed herein for the entire balance due, including interest and collection costs.

Customer's Name (Print): _____ Date: _____

Customer Signature: _____ Date: _____

Company Name (Print): _____

Signature: _____ Date: _____

Name and Title of Authorized Representative (Print) _____

Date: _____

PLEASE REMEMBER:

A COPY OF THE ACCOUNT HOLDER'S DRIVER'S LICENSE AND CREDIT CARD FOR THE FILE IS REQUIRED.

PLEASE FAX A SIGNED AND COMPLETED COPY OF THIS APPLICATION, ALONG WITH A COPY OF DRIVER'S LICENSE AND CREDIT CARD TO 1-800-359-1298 FAX.

**THANK YOU CHOOSING CHICAGO A1 LIMOUSINE SERVICE INC,
WE LOOK FORWARD TO SERVING YOU!!**



CHICAGO A1
LIMOUSINE SERVICE

Phone: (888) 546-6012
Fax: (800) 359-1298
Web: www.ChicagoA1.com
Email: info@chicagoA1.com