

Fax Reservation Form

Today's Date: _____ Billing Company: _____ Booked By: _____ Phone #: _____ Confirmation #: _____ Confirmed By: _____	Type Of Service: (Circle Only One Below) As Directed Airport Pick-Up/Drop-Off Wedding Prom Other _____ Price Quoted \$ _____ +20% Gratuity All tolls and parking are in addition to above quote.
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Type Of Vehicle Needed: (Circle only one type of vehicle needed below)

Sedan: 2-3 Pass 4 Pass CEO Navigator 6 Pass SUV **Limos:** 6-8 Pass 8-10 Pass
 8-10 Pass Chrysler 12-14 Pass 16-18 Pass Hummer 18-20 Pass Escalade or Navigator

Buses: 24-26 Pass Limo Bus 28-34 Pass Limo Bus 33 Pass Coach Bus 35-50 Pass Limo Bus
 50-80 Pass Mega Liner Double Decker Limo Bus Other: _____

Please fill out the following information and fax it back to Designer Limousines at 516.944.7096

Date of Service: _____ P/U Time: _____ AM/PM Passenger Name: _____ Pickup Address: _____ City: _____ State: _____ Zip: _____ Phone#: _____ Cross Street: _____ Destination: _____ _____ _____ _____	Special Instructions: As per: _____ _____ _____ _____ _____ _____ _____ _____
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Designer Limousines is hereby authorized to reserve a limousine for the stated date and time via a valid credit card authorization or charge my credit card for all the transportation charges that are incurred at my request. This authorization, once signed, is valid whether or not a charge slip has been signed. If for any reason, the account balance is not paid, I agree that I will be liable for any and all reasonable legal fees and costs, in addition to the outstanding balance. All information will be kept strictly confidential.

Payment Information (Check One Below)		** a fuel surcharge will be applied if gas goes above \$2.50 / gal.
Corporate Account _____ Credit Card _____ Barter/Trade Account _____ Other _____		
Credit Card Information: (Choose and Check Only One Credit Card Below)		
AMEX _____ VISA _____ MasterCard _____ Discover / Novus _____		
Full Name On CC: _____		CC #: _____
Billing Address: _____		Exp. Date: _____
City: _____ State: _____ Zip: _____		CVV2: _____
Home Phone #: _____		Business Phone #: _____
Signature: _____		Date: _____

An 8% Administrative Fee will be added to all charges, if credit card is used as a method of payment. All payments are due in cash or credit card only on the day of service, unless paid in full 20 days prior to the date of service. Sorry, there are absolutely no exceptions. Any changes to the information stated on this sheet will result in a cancellation fee, so please call us toll free at 800.540.3374.