



All Bay Limousine Services

CREDIT CARD AUTHORIZATION FORM

Date: _____ Reservation # _____ Date of Service: _____
 To: _____ Company: _____
 Fax Ph# 415-877-1796 Office/Other Ph# 415-877-1899
 From: _____ Extension # _____

For my convenience, I am authorizing All Bay Limousine to execute transactions indicated below. Reservations require a 50 % Non-Refundable deposit, reservations within 72 hours (3 Days) of service are required to be paid in full. Reservations that are **cancelled** within 72 hours prior to service **will be charged and collected in full**. Once you have signed both the Agreement and Credit Card Authorization form, you must fax them back for final confirmation within 24 hours upon receipt or your Reservation becomes **VOID**.

Name on Credit Card: _____

Credit Card# _____ Exp. Date: _____ CVV Code: _____

Billing Address: _____ City _____ Zip _____

Please circle one of the following:

- Visa/Mastercard
- American Express
- Discover/Diners

50 % Deposit Amount \$ _____
 Card holders Initials _____

50 % Non-Refundable Deposit. 72 Hour Cancellation. If you would like your reservation pre-paid, please fill in the amount

			AMOUNT

DATE	AUTHORIZATION		SUB TOTAL	
REFERENCE NO:	REG/DEPT.		TAX	
FOLIO/CHECK NO.	SERVER	CLERK	TIP / MISC.	
SALES SLIP			TOTAL	

X _____ Date _____

Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholders agreement with the Issuer.

Yes, please keep my authorization on file: Please Intl: _____

Transactions executed on my behalf will read "Signature on File" on the signature line of the Credit Card Ticket. By executing this document, it will not be necessary for me to sign each credit card ticket. Please make the necessary arrangements indicated above if you would prefer to have your Total Balance paid in full at the time of booking., Otherwise, the Remaining Balance Due will be charged 5 days prior to the date of service. Please call should you have any questions regarding your reservation.

Name/Company: _____

Auth. Form Expiration: _____

*** READ "TERMS and CONDITIONS" on your Sales Contract. ***