



Vision Limousine

Corporate Account Application & Agreement

Print out the corporate application and fax to: 562-292-3485

Company Name:* _____

D/B/A:* _____

Federal Tax ID#:* _____

Address:* _____
(P.O. Box not acceptable)

City:* _____

State:* _____

Zip:* _____ Phone#: _____

Fax#: _____

Email:* _____

Credit Card Information

Type:* _____

Card Number:* _____

Expiration date:* _____

Card Holder:* _____

Other Information

Estimated Usage: \$ _____ per month

Invoice type (Required)

- Standard \$1.00/Job Charge
- Executive \$3.00/Job Charge

Authorizing Officer/Owner

First Name:* _____

Last Name:* _____

M.I. :* _____

Address:* _____

(P.O. Box not acceptable)

City:* _____

State:* _____

Zip:* _____ Phone# *: _____

Email:* _____

Terms:

I for myself/we for ourselves, and on behalf of my/our company (where applicable), as owner/officer and/or guarantor of the company, hereby certify, agree and accept the following:

Vision Limousine may investigate exchange and use information and reports on the account(s) authorizing officers and myself, with credit reporting agencies and others from time to time and without a notice to applicant(s), The following fees will be added where appropriate, base fare, stop time, wait time, two way tolls, parking, airport and regulatory fee, 20% chauffeurs gratuity, 20% holiday surcharge on waiting time (if and as applicable), A fifteen minute grace period is allowed on reported domestic flight arrival time and a thirty minute grace period is allowed on international flight arrival time. A ten minute grace period is granted for all other pickups. Waiting time will be charged at \$10.00 per 15 minute increments once the grace period has elapsed. For train station pick up, train schedules cannot be monitored. Therefore, the billing begins at the moment the ten minute grace period has elapsed. Stops en route are charged at \$10.00 per stop. Stops off route are reverting to the hourly rate as noted above.

Hourly rates: Vehicle rates of travel in which point to point rate does not exist, will be billed per hour rate (rates may vary for each state), 4 hour minimum, billed from the time the vehicle leaves our facility until the time it returns. Fractions of an hour are rounded to next half-hour. Applicant(s) are responsible for the safekeeping and security of the Vision account number and any and all related usage thereof.

Applicant(s) acknowledge that Vision may alter, complete or execute Vision vouchers on Applicant(s) behalf and accept the assessment of service charges in cases of "No Show" at Vision's sole discretion. Invoices are due in fifteen days after issuance of bill. Accounts wholly or partially unpaid ten days after due date are subject to a service charge ranging from \$5.00 to \$35.00 depending on the open balance, in addition to 1.5% monthly finance charge. Insufficient/returned checks are subject to a \$35.00 service charge. Inordinate delay in payment will further result in the suspension and or/cancellation of charge privileges at Vision's discretion.

Applicant(s) give Vision permission to submit unsigned credit card vouchers that the applicants' signature is on file, or to amend alter, complete or execute on behalf of

the applicant(s), credit card voucher(s) in applicants name for payment of any charges. In an event if any or all charges are not paid within 45 days of invoicing, applicant(s) acknowledge the account as delinquent and agree to pay all costs of collection, including but not limited to attorneys fee of 1/3 of the sum due or \$75.00 whichever is greater. Upon such delinquency any controversy or claim seeking monetary damages above \$3,000.00, including any claim based upon or arising from an alleged tort, may at Vision's sole discretion be settled by binding arbitration in accordance to the commercial arbitration rules of American Arbitration Association in effect and judgment upon the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof any remedy that would be available from a court of law or equality shall be available from the arbitrator(s). The arbitration hearing and all proceedings in connection therewith shall take place in Orange or Los Angeles County.

Applicant(s) hereby also apply for credit voucher charge. In addition to filling out this form, applicant(s) must submit a letter on its letter head indicating a list of names of authorized personnel who are allowed to place ride/job orders. The applicant(s) assumes all financial obligations and guarantees payment with regard to charges incurred on all vouchers for ride/jobs by authorized personnel. To include Vision to establish the account, the applicant(s) personally, individually and jointly unconditionally guaranty payment and performance of any and all obligations under the agreement. The guaranty shall be continuing and irrevocable. Applicant(s) waive presentment, demand, notice of default and nonpayment or protest thereof, and consent to any modification and/or renewal of the credit hereby granted and guaranteed.

Applicant(s) agree not to solicit, directly book, or receive services from Vision drivers and/or employees, unless actually booked through and dispatched by Vision.

Applicant(s) are hereby notified that the cars in which applicant(s) and or their assignees will be riding may be independently owned and operated vehicles. Vision accepts no liability whatsoever connected in any way with the operation of all vehicles and/or drivers. Applicant(s) hereby agrees to hold Vision and its employees safe and harmless from any claims and/or damages whatsoever, of any kind, sort, nature, or origin, whether punitive or not, including but not limited to legal costs and fees. Applicant(s) hereby acknowledge that all calls made to/from Vision may be recorded.

I/We have read, understood and agree to be bond by all the above terms and conditions. Should it become necessary for any usage to be charged to any credit card, my/our signature below shall be considered to have been made on the applicable credit card and/or voucher and I/we give Vision permission to fill out and sign the voucher on my/our behalf.

SIGNATURE/Initials: _____

Date: _____

***Required Information**