

TEL: 718-707-9100  
FAX: 718-707-9099  
E-MAIL:  
[service@lotusride.com](mailto:service@lotusride.com)



38-60 13<sup>th</sup> St.  
L.I.C., NY 11101  
DISPATCH CENTER:  
718-707-5000

## CORPORATE ACCOUNT APPLICATION

Account #:	Date:
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*(for office use only)*

Name of Company			
Address	Floor/Suite	Tel.	
City	State	Zip Code	Fax.
Type of Business	Years in Business	Federal Tax ID	
Billing Attention			Title
Bank Name			Account Number
Bank Address			Bank Tel.
Contact Name			Bank Fax.
Other Credit Reference			
Other Limousine/Car Services Used			
Referred By <input type="checkbox"/> Company: _____ <input type="checkbox"/> Individual: _____			

### CONDITIONS

Upon approval of this application, Lotus Ride will assign to its clients an **Account Number** and provide a quantity of vouchers to be used by its employees and guests. The Clients accept responsibility for payment of **All Vouchers** containing applicants **Name or Account Number** turned into our office by our drivers. If vouchers are stolen from the Client, Lotus Ride should be notified immediately in writing so that account number may be changed, or service stopped. The Client accepts responsibility for any unauthorized use of Lotus Ride if above procedures are not followed.

Lotus Ride reserves the right to cancel the Client's account if use of our transportation service is extremely light or if Client fails to pay invoices within 30 days of invoice date. Invoices must be paid fully by the Client, and not by the individual users.

There will be a \$ 4.00 processing fee on each voucher.

\_\_\_\_\_  
Authorized Person Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Visit our web site at [www.lotusride.com](http://www.lotusride.com)

**PLEASE LIST 3 TRADE REFERENCES BELOW**

(Landlord & CPA firm to be excluded)

Name of Co. \_\_\_\_\_ Contact: \_\_\_\_\_

Type of Business: \_\_\_\_\_ How long doing business with: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name of Co. \_\_\_\_\_ Contact: \_\_\_\_\_

Type of Business: \_\_\_\_\_ How long doing business with: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name of Co. \_\_\_\_\_ Contact: \_\_\_\_\_

Type of Business: \_\_\_\_\_ How long doing business with: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

I, the undersigned, authorize Lotus Ride to contact the above listed references for credit application purposes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

*We are sorry, but we cannot be responsible for personal property left in a vehicle or curbside. Please make sure passengers know to take all personal belongings when entering and or leaving the vehicle.*

Visit our web site at [www.lotusride.com](http://www.lotusride.com)