



Corporate Account Application

| | | |
|--|----------------|-----------|
| Business Contact Information | | |
| Company Name: | | |
| Address: | | |
| City: | State: | Zip Code: |
| If different from above please include billing address below - | | |
| Billing Address: | | |
| City : | State: | Zip Code: |
| Primary Contact: | | Title: |
| Phone Number: | Fax Number: | |
| Mobile Number: | Email Address: | |

Corporations Only:

| | |
|----------------|-----------------|
| Federal ID No: | Annual Sales: |
| President: | Vice President: |

Credit Card Information:

| | | |
|---|------|-------|
| <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> Diners Club | | |
| Card Number: | Exp. | CVV: |
| | | |
| <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> Diners Club | | |
| Card Number: | Exp. | CVV: |
| Print Card Holders Name: | | |
| Card Holder Signature | | Date: |
| Please include a copy of the credit card(s), both front and back with signature. Copies of charge slips and applicable invoices are mailed on the date of posting. Any discrepancies should be brought to our attention within 7 days of receipt of bill. | | |

Bank Reference:

| | | |
|----------|---------|--------------|
| Bank: | Branch: | Broker: |
| Contact: | Phone: | Credit Type: |

Credit Reference:

| | |
|------------------|--------------|
| Business: | Contact: |
| Address: | Phone: |
| Account Number: | Credit Type: |
| Business: | Contact: |
| Address: | Phone: |
| Account Number: | Credit Type: |
| Business: | Contact: |
| Address: | Phone: |
| Account Number: | Credit Type: |



Authorized Users

Please list all persons authorized to charge services to your corporate account.

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |

| | | | |
|-----------------|-------|-------------|--|
| Name: | | Title: | |
| Business Phone: | | Cell Phone: | |
| Home Address: | | | |
| City | State | Zip Code: | |
| Notes: | | | |



Agreement:

By completing and signing this application for credit, applicant expressly authorizes American Sedan, Inc. ("AMERICAN") to obtain employment, credit and other such information as it may subjectively deem necessary in connection with the application made herein. Full payment shall be due within 10 days of receipt of statement. Failure to make payment in full by the due date, shall subject applicant's account to a LATE PAYMENT CHARGE, which shall be computed on the "average daily balance" at an annual percentage rate of 18%. Interest shall be compounded daily. To get the "average daily balance" we take the beginning balance of your account each day and add any new charges, other adjustments and any unpaid late payment charges, and subtract any payments or credits. This gives us the daily balance. Then, we add up all the daily balances for the billing cycle and divide this total by the number of days in the billing cycle. This gives us the "average daily balance".

In the event the account remains unpaid for more than 30 days, and in addition to any Late Penalty Charges, AMERICAN shall have the right to utilize any lawful collection methods to secure full payment. In such event, applicant shall be liable for any and all expenses, including legal fees and costs, incurred by or on behalf of AMERICAN in the collection of said monies. This application and any dispute or action relating hereto shall be governed by the State of Virginia. Jurisdiction shall be in the County of Fairfax, Virginia. Parties agree that at the time of formation, damage from late payment is reasonably foreseeable and difficult to calculate. Parties agree that this liquidated damage clause is not intended as a penalty, but as a reasonable estimate of actual damages.

The undersigned hereby certifies that all of the information provided in connection with this application is true, correct, complete and is being expressly made by the applicant to induce AMERICAN to extend credit to the applicant knowing that AMERICAN will rely thereupon.

The undersigned represents that he/she is duly authorized to submit and make this application. The undersigned agrees that this application shall become part of any and all agreements between the parties.

The undersigned has read, understands and agrees to the terms and conditions above and by signing below, binds the applicant, applicant's assigns, trustees, heirs, distributees, legatees, executors, administrators and other parties succeeding in interest.

Credit Cards -- Subject solely to conditions/limitations set forth herein, undersigned unconditionally guarantees payment of all amounts due for service rendered by American Sedan, Inc... ("AMERICAN") including 20% gratuity, an additional 7% service charge and all applicable interest & penalties thereupon, payable by reason of, but not limited by, the undersigned's use of the credit card(s) above specified. This Guaranty shall not be affected by any voluntary or involuntary reorganization, dissolution, merger and/or acquisition of the principal debtor, if any. The filing of any voluntary or involuntary bankruptcy or any other protection from creditors by the principal debtor under any state or federal law shall in no way reduce the full applicability of this Guaranty. This is a Continuing Guaranty, which shall remain in force as to successive charges made against the above specific credit card(s), if any, by the

American Sedan, Inc.

P.O. Box 2404 | Fairfax, VA 22031

Toll Free: 866.476.1591 | Local: 703.764.4491 | Fax: 703.764.3057

Email: reservations@americansedandc.com | www.americansedandc.com



undersigned until a written notice of revocation of this Guaranty is received by AMERICAN at its office as set forth above. Notice of such revocation shall not effect or terminate this Guaranty as to charges made by the undersigned prior to actual receipt of said notice of termination. This Guaranty covers any and all sums owing as a result of transactions entered into by the undersigned, its agents, employees, assigns and/or any other such party with AMERICAN. Diligence and all demands and notices from or on behalf of AMERICAN is/are hereby waived. This Guaranty shall be governed by and in accordance with the laws of the State of Virginia and venue for any legal action against the undersigned to enforce this Guaranty shall be in the County of Fairfax, State of Virginia. I hereby authorize AMERICAN, its successors and/or assigns to charge any one of the above credit/charge card accounts for transportation and related services rendered by AMERICAN, or any of its affiliates to me or any person or entity at my request. AMERICAN, its principles, officers and directors may rely on its authorization and shall not be liable for acting in reliance hereof. I agree to indemnify AMERICAN, its principles, officers and directors from any claims, losses suits, damages or expenses, including reasonable attorneys' fees, or other liability in connection with this authorization and any reasonable reliance thereof.

Signature

Title

Printed Name

Date

American Sedan, Inc.

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