



TWO WAY RADIO CAR

88-19 101 Avenue
Ozone Park, NY 11416
Phone: 718-845-1705

Must Check a BOX

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Fax: 718-845-1709

Referred by: _____

Car Service
Customer Authorization to Bill Credit Card
Personal Enrollment Application

Name (as it appears on credit card) _____

Street Address _____

City _____ State _____ Zip Code _____

Which credit card should we bill? () Am Exp () MC () Visa () Discover () Diners

Credit Card # _____ Exp Date _____

Effective immediately, I request and authorize intaBORO to establish a Personal Car
Car Service account billable to me. Settlement of my account will be billed to my credit
Card, listed above as each trip is taken.

Please keep my credit card number on file within your system. Please note that the
person traveling may not have the designated card on his person for presentation to
driver, but will have signatory authority for this card on file with intaBORO, and I will
be responsible for any and all charges posted to it.

Signature _____ Date _____ VIP # _____

Home Telephone _____ Business Phone _____

Email Addy _____

When completed, please fax this application to 718-845-1709, or email it back
Should you have any questions please call