



Always On Time

3 MORGAN DRIVE UNIT 53 MOUNT KISCO, NY 10549

I \_\_\_\_\_,  
hereby authorize ALWAYS ON TIME TOURS LLC. to charge the credit card listed below for rental.

Client Name: \_\_\_\_\_

Tel #: \_\_\_\_\_

WE REQUEST A COPY OF YOUR: .  
DRIVER'S LICENSE . CREDIT CARD  
PRIOR TO BOOKING



on the date of \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ for:

Type of Card:  VISA  MASTERCARDS  AMERICAN EXPRESS

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Email: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_

CVV Number: \_\_\_\_\_

Total Amount Due: Total \_\_\_\_\_ (USD)

Amount Charged: \_\_\_\_\_ (USD)

A Fee of 3.5% for Visa/MasterCard & 4.8% for  
AMEX will be added to final bill.

In signing this authorization form, I give permission to the ALWAYS ON TIME TOURS LLC. to charge the card listed here for the full amount listed on my contract. I assume full responsibility for ANY and ALL damages done to the vehicle by any member of my party (or any individual invited aboard). I give permission to the ALWAYS ON TIME TOURS LLC. to charge the card on file to rectify damages done if the need so arises without my express permission. My signature indicates I have read and agreed to the Terms & Conditions given to me.

PRINT NAME \_\_\_\_\_

AUTHOURIZD SIGNATURE \_\_\_\_\_



Always On Time