

Diamond Chariots Limousine Service

P. O. Box 423, Clyde, Ohio 43410 Phone (419) 547-0808

LIMOUSINE CONTRACT

Date ____/____/____ Day _____ Limo Name _____ # Passengers _____

Contact Name _____ Phone # _____ Cell # _____

Contact Email _____ Contact Address _____

Passenger Name _____ Phone # _____ Cell # _____

Event _____

Pick-Up Location _____ Time _____ AM PM

Pick-up Address _____

Drop-Off Location _____ Time _____ AM PM

Drop-off Address _____

Special Instructions _____

HOURS	OVERTIME BEGINS @	@ \$	PER HOUR/CASH ONLY	PACKAGE	HOURS
Method of Payment	CASH	CHECK	CREDIT CARD	Limousine	\$ _____
Credit Card #				Gratuity	\$ _____
Type	Exp Date	/	/	Tax	\$ _____
Cardholder Name				Sub Total	\$ _____
Address				Deposit	\$ _____
Deposit Amount \$	Date				(Non-Refundable Deposit)
Balance Due \$	Date			Balance	\$ _____
				Add'l Payment	\$ _____
Driver				Balance Due	\$ _____

Contract Agreement: Deposits are non-refundable unless vehicle is rescheduled then a full refund will be given. Please observe our non-smoking policy. The client is responsible for guests and assumes full financial responsibility for any damages to vehicle caused by client or guest whether by accident, neglect, or intent. We assume no responsibility for articles left in vehicles. Driver may terminate charter at any time without refund if they deem the party unruly or endangering the safe operation of the vehicle. Driver is not responsible for illegal acts during rental. We will not be responsible for any delays or inconveniences due to traffic, unforeseen mechanical failures, or situations deemed an "Act of God". We reserve the right to substitute alternative vehicles in the event of an occurrence beyond our control. Client assumes full financial responsibilities for all payments due at the end of the charter, including overtime, gratuity, and damage fees. Regurgitation fees are \$200, everything else will be estimated by a professional. Client authorizes charges to credit card, with/without imprint. WE AGREE TO THE ABOVE TERMS & CONDITIONS

Clients Signature of Authorization: _____ Date: ____/____/____

Diamond Chariots Representative _____ Date: ____/____/____

CONTRACT IS NOT VALID UNTIL SIGNED BY A DIAMOND CHARIOT REPRESENTATIVE AND A DEPOSIT CHECK HAS CLEARED OUR BANK

