**Chelsea Rental**
**549 West 26th St. (b/t 10th & 11th Ave) NY, NY 10001**
**Phone 212-564-9555 / Fax 212-564-0677**

## Credit Card Authorization

Company Name: _____

Company Address: _____

_____Zip Code_____

Name of Cardholder: _____

Address of Cardholder: _____

_____Zip Code_____

Telephone #: Area Code:_____Number:_____

Fax #: Area Code:_____Number:_____

Cell Phone #: Area Code:_____Number:_____

Email:_____

Credit Card Number: _____

Expiration Date: _____ CVV:_____ Billing Zip:_____

_____ _____
Cardholder Signature Date

Cardholder personally guarantees payment for all rentals and authorizes Chelsea Rental Corp. to bill his/her credit card, in addition to other remedies. Reservations are final and cannot be cancelled or refunded. Rentals subject to NYC Sales Tax.

Driver Name/Phone#_____

P/U Time/Date_____ Return Time/Date_____

Vehicle Type_____ Destination (Farthest Point)_____

Addtl Info/Vehicle Requirements (i.e. lift gate, payload, temp (refrigeration) requirements etc.) :