703-499-1041 | www.aoplimo.com

CORPORATE ACCOUNT PAYMENT AUTHORIZATION

No card numbers or security codes are collected on this form.

COMPANY INFORMATION

Legal company name

Department / division

Billing address

City / state / ZIP

Billing email

AUTHORIZED COMPANY REPRESENTATIVE

Full name

Title

Business phone

Email

BILLING ARRANGEMENTS

Account / reference number (if applicable)

Purchase order (if required)

PAYMENT AUTHORIZATION

On behalf of the company identified above, I authorize AOP Limousine to charge the payment method securely provided through its Square / LimoAnywhere payment process for approved transportation reservations, applicable taxes, tolls, parking, gratuities (when agreed), and other disclosed charges. This authorization applies to company bookings approved by an authorized representative and remains effective until the company revokes it in writing, subject to payment obligations already incurred.

No credit card number, expiration date, or CVV is requested or stored in this PDF.
Payment information must be submitted only through the secure payment link provided by AOP Limousine.

ACKNOWLEDGMENT AND SIGNATURE

By signing, I confirm that the information above is accurate and that I have authority to approve the payment arrangements described. A typed name indicates my intent to sign electronically.

Electronic signature (type full name)

Date (MM/DD/YYYY)

For review: typed signature fields are fillable; certified digital signatures require a compatible signing service.