



CORPORATE RENTAL APPLICATION

Company Name:	Address:
Phone:	City, State Zip
Fax:	Email:
Fed. Tax ID#:	Date:
Years in Business:	

***If tax exempt – please include a copy of your tax exemption certificate when returning this application**

Credit Check may be run to determine the worthiness of credit.

Company Fleet Contact Name and Phone# :

Company Accounts Payable Contact Name and Phone#

Insurance Company: _____

Insurance Company Phone #: _____

Insurance Policy #: _____

Insurance Collision Deductible: \$ _____

CREDIT CARD INFORMATION

Visa _____ Mastercard _____ American Express _____ Discover _____

Name on card: _____

Credit Card # _____

Expiration Date: _____ Security Code: _____

I authorize ACE Rent a Car / Black Mobility to charge my credit card for all rental charges including any parking tickets, tolls, fuel or damage that may incur during my rental period.

Authorized Signature: _____

AUTHORIZED DRIVERS

All drivers must be employed by the company, over 25 years of age and possess a valid driver's license