

F.M.I. Limousine Service, Inc.

Affiliate Application

Company Information

Business Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Website: _____

Business Type: _____

Primary Contact Name: _____ Position: _____

Billing Information

Billing Address: _____

City: _____ State: _____ Zip: _____

Credit Card Type: MasterCard Visa Amex Discover

Credit Card Number: _____

Expiration Date: _____ Security: _____

Primary Contact Name: _____ Position: _____

Best Time to Contact: _____ E-Mail Address: _____

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Affiliate Application (continued)

Company Operational Information

- 1. Does the company function 24 hours a day, 7 days a week? Yes No
- 2. Do the vehicles have G.P.S Navigation systems?..... Yes No
- 3. Is G.P.S. tracking available?..... Yes No
- 4. Is gratuity included in your fees? Yes No
- 5. If "Yes," what is the percentage of gratuity? _____
- 6. What method is used to communicate with drivers? _____
- 7. How is "Flight Update" info indicated? _____
- 8. What amenities are available in the vehicles?_____
- 9. Which area airports do you service? _____

- 10. What is your policy for cancellation? _____
- 11. Grace period before additional charges _____
- 12. Description of driver dress code _____
- 13. Are background checks and drug testing for drivers performed? Yes No
- 14. How many drivers are employed?_____
- 15. How long has the company been established?_____
- 16. Who is your insurance provider?_____
- 17. How much is your insurance coverage?_____
- 18. What method is used for "off hour" phone calls and reservations? _____

Name: _____ Title: _____

Signature: _____ Date: _____

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Affiliate Application (continued)

Fleet Information

Vehicle Type	# in Fleet	Make	Model	Year	No. of Pass.	Add'l Info.
Sedan						
Limo						
SUV						
Van						
Mini Bus						
Coach						
Other						