



Phone: 888-513-9711 • Fax: 888-513-9712

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Miami International Airport Location • 4019 NW 25th Street • Miami, Fl 33142 • Phone: 305-871-7300
Miami Beach, Florida Location • 1510 Collins Avenue • Miami Beach, Fl 33139 • Phone: 305-513-9711
Atlanta, Georgia Location • 980 Northside Drive NW • Atlanta, Ga 30318 • Phone: 404-810-9070

Reservation & Credit Card Authorization Form

This form does not guarantee a reservation. Reservations are only final once you have been contacted by a Prestige Luxury Auto Rentals Reservation Specialist and your rental application has been approved and an email confirmation is sent.

SECTION 1a: CONTACT INFORMATION			
Is this vehicle rental for you? (Please check one): <input type="checkbox"/> NO (if no, please fill out this section) <input type="checkbox"/> YES (if yes, please continue to section 1b)			
Contact Name	Contact Phone	IATA/CLIA No. (if applies)	
Company Name	Contact Email Address	Contact Fax	
Street Address		City and State	Zip Code
Are you a Referral Program Partner or Rental Agent? (Please check one): <input type="checkbox"/> NO <input type="checkbox"/> YES		Referral Program Partner ID/Rental Agent ID	
If necessary may we contact the client directly prior to arrival? (Please check one): <input type="checkbox"/> NO <input type="checkbox"/> YES			

SECTION 1b: RENTER INFORMATION			
Last Name	First Name	Age	Date of Birth
Driver's License No.	State	Expiration Date	
Street Address		City	Zip Code
Contact Phone	Home Phone	Work Phone	Email Address
Will there be an additional driver? (Please check one): <input type="checkbox"/> NO (if no, please continue to section 2) <input type="checkbox"/> YES (if yes, please fill out section 1c)			

SECTION 1c: ADDITIONAL DRIVER(S) INFORMATION			
Total No. of Additional Drivers: _____ (fees apply for additional drivers)			
If more than one additional driver, please provide the following information for all drivers and check the box that applies.			
Additional Drivers' Information: <input type="checkbox"/> Attached <input type="checkbox"/> To Follow (The reservation will not be guaranteed until all drivers' information is received)			
Last Name	First Name	Age	Date of Birth
Driver's License No.	State	Expiration Date	
Street Address		City	Zip Code
Contact Phone	Home Phone (Optional)	Work Phone (Optional)	Email Address (Optional)

SECTION 2: INSURANCE INFORMATIONWill you require Rental Insurance? (Please check one): **NO** (if no, please fill out this section) **YES**

Insurance Carrier		Policy No.	Expiration Date
Insurance Carrier Phone No.	Agent Name		Agent Phone

SECTION 3a: TRAVEL INFORMATIONAre you renting this vehicle locally? (Please check one): **NO** (if no, please fill out this section) **YES** (if yes, please continue to section 4a)

Destination Airport	Airline	Flight No.	Flight Arrival Date	Flight Arrival Time
Originating Airport		Flight Departure Date	Flight Departure Time	

SECTION 3b: TRAVEL INFORMATION – HOTEL INFORMATIONWill you be staying at a hotel? (Please check one): **NO** (Please continue to section 3c) **YES** (if yes, please fill out this section)

Hotel Name		Hotel Reservation Name	Hotel Phone	
Street Address			City	State Zip Code

SECTION 3c: TRAVEL INFORMATION – LOCAL ADDRESS

Street Address		Local Phone	
City		State	Zip Code

SECTION 4a: RENTAL INFORMATION

Desired Vehicle: 1 st Choice		Desired Vehicle: 2 nd Choice	
Pick-up/Delivery Date and Time	Return/Drop-off Date and Time	No. of Passengers	No. of Bags
Do you desire vehicle delivery and/or picked-up? (Please check one): <input type="checkbox"/> NO (Please continue to section 5) <input type="checkbox"/> YES (if yes, please fill out section 4b)			

SECTION 4b: DELIVERY/PICK-UP INFORMATION*Delivery fees may apply depending on the vehicle and area.*Which service do you desire? (Please check one and fill out the below section): **DELIVERY** **PICK-UP** **BOTH**

Location (i.e. airport, home, etc.)	Street Address (if provided above please write as above)		
City	State	Zip Code	
Additional Comments (i.e. gate codes, security access, etc.)			

SECTION 5: CREDIT CARD INFORMATION

Card Type <i>(Visa, MasterCard, Amex and Discover Cards only)</i>		Card No. _____ - _____ - _____
Expiration Date	CVV	Cardholder's Name
Is the card's billing address the renter's address provided above? <i>(Please check one)</i> : <input type="checkbox"/> NO <i>(Please fill out the below field)</i> <input type="checkbox"/> YES		
Billing Address <i>(Street Address, City, State & Zip Code)</i>		
Amount to be charged on the card <i>(Please check one)</i> : <input type="checkbox"/> Total Due <input type="checkbox"/> Other _____ <i>(please specify amount)</i>		
Do you want to place your security deposit on the same credit card? <i>(Please check one)</i> : <input type="checkbox"/> NO <input type="checkbox"/> YES		
I understand and agree that in the event that I cancel my reservation less than seventy-two (72) hours prior to the rental my credit card will be charged a cancellation fee equal to one day's rental of the vehicle.		
Signature: _____		Date: _____

SECTION 6: POLICY AND AGREEMENT

To complete your reservation, please send a copy of your driver's license, the front and back of your credit card and a copy of your insurance card if you are choosing to provide your own insurance, via fax at 888-513-9711 or email at reservations@prestigeluxuryrentals.com.

All rental vehicles have a limit of one hundred and fifty (150) miles per day unless stated otherwise. Each additional mile will be subject to a surcharge to be prearranged.

A security deposit in the form of a credit card authorization or cash is due at the time of the rental. Smoking and pets are prohibited in all vehicles, should the either of these be detected in the vehicle a \$500 fine will be charged.

Vehicles may only be driven in the state in which they are rented in, should you need to drive the vehicle across state lines please let us know so the proper arrangements can be made.

Please see the Prestige Luxury Auto Rentals Rental Policy for further details and policy restrictions.

By signing below, you are authorizing Prestige Luxury Auto Rentals to charge your credit card and acknowledging that you have read and understood our policy.

Signature: _____ Date: _____