



## Affiliate Application Form

### Contact Information

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Company Name:

Office Address:

City:

State:

Zip Code:

Toll Free Number:

Office Number:

Fax Number:

Email Address:

Accounting Email Address:

Office Hours:

#### Emergency Contact After Hours

Contact Name:

Contact Phone:

Reservation phone number:

Reservation Email Address:

Federal ID Number:

Website Address:

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## Dispatch Contact Information

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Dispatch First Name:

Dispatch Last Name:

Toll Free Number:

Office Number:

Fax Number:

Email Address:

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## Owner Contact Information (Optional)

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Owner First Name:

Owner Last Name:

Office Address:

City:

State:

Zip Code:

Toll Free Number:

Office Number:

Fax Number:

Email Address:

## General Manager Contact Information

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General Manager First Name:

General Manager Last Name:

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Toll Free Number:

Office Number:

Fax Number:

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Email Address:

## Affiliate Manager Contact Information

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Affiliate Manager First Name:

Affiliate Manager Last Name:

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Toll Free Number:

Office Number:

Fax Number:

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Email Address:

## Operations Manager Contact Information

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Operations Manager First Name:

Operations Manager Last Name:

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Toll Free Number:

Office Number:

Fax Number:

---

Email Address:

## Reservations Manager Contact Information

---

Reservations Manager First Name:

Reservations Manager Last Name:

Toll Free Number:

Office Number:

Fax Number:

Email Address:

## Accounting Manager Contact Information

---

Accounting Manager First Name:

Accounting Manager Last Name:

Office Address:

City:

State:

Zip Code:

Toll Free Number:

Office Number:

Fax Number:

Email Address:

## Contact Information

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24/7 Phone Number:

Emergency Contact Number If No 24/7 Dispatch Service:

Are you a member of NLA (National Limousine Association)?

Yes  No

Do you have ICC/DOT Permits?

Yes  No

## System & Software Use

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What is the reservation software you use?

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Does the affiliate have a 24-Hour dispatch and reservation center?

Yes  No

If no, please provide an emergency contact number

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Can reservations be confirmed via email?

Yes  No

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Can invoices be closed within 24 hours?

Yes  No

## Chauffeur or Employee Info

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Do you have  Employees or  Independent Contractors

If employees, how many employees do you have:

Do you do a pre-screening drug test before hiring?

Yes  No

Is there any random drug testing after the employees are hired?

Yes  No

If yes, how often does testing take place:

Do your employees have their criminal background checked?

Yes  No

If the affiliate has employees, do they carry Worker's Compensation Insurance?

Yes  No

## Chauffeur or Employee Info - Continued

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How many chauffeurs do you employ?

Are the chauffeurs equipped with cell phones that they can use to communicate with passengers?

Yes  No

Please describe your chauffeur training:

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Are chauffeurs  W-2 employees or  1099 Independent Contractors

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## Vehicle Info

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Do you have the latest models of Sprinter/Transit vans?

Yes  No

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Do you have an updated Insurance Certificate?

Yes  No

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Are your vehicles all black on black?

Yes  No

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Do you allow smoking in your vehicles?

Yes  No

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Are you equipped with vehicle tracking devices?

Yes  No

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Are vehicles equipped with Drive-Cams?

Yes  No

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## Vehicle Info - Continued

Any other technologies?

## Vehicle List and Rate Sheet

Vehicle Type	Make & Model	Year	Color	Quantity	Passenger Capacity	Airport Rate	Hourly Rate
Luxury Sprinter							
Luxury Transit Van							
10-14 Pass Sprinter							
Corporate Sprinter							
Party Bus							
Mini Coach							
Motor Coach							
Executive Sprinter							
Jet Sprinter Van							
Other							

# Cancellation Policies

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What are your cancellation policies and no show policies?

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Do you agree to a 1 hour cancellation policy on local trips?

- Yes     No
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Do you agree to a 48 hour cancellation policy on bus trips?

- Yes     No



## Airports

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Where do you meet the passengers for arrivals?

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Do you provide  Curbside Service or  Meet and Greet Service for arrivals

Do you charge for meet and greet?

Yes  No

If yes, how much do you charge?

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Describe the airport meet greet capabilities for arrivals:

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What airports (big and small) do you service in the area? Please provide airport codes along with airport names:

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Do you track flights?

Yes  No

If yes, how do you track flights?

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## **Once completed, please send back together with:**

- Completed Rate Sheet, hourly and transfers, affiliate discounts, parking and tolls.
- Complete the Driver's information table provided by Book A Sprinter.
- Please send a Certificate of Liability Insurance. Have your agent send an ACORD with Book A Sprinter. named as additional insured. Include a vehicle list from your insurance company with all vehicles insured under said policy.
- Please send a Certificate of Workers Compensation Insurance. Please have your agent send an ACORD with Book A Sprinter named as additional insured.
- Please send a copy of your limousine-operating license.
- Please send a NYC TLC base license (For NY affiliates only).

**To: [affiliate@bookasprinter.com](mailto:affiliate@bookasprinter.com)**

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Book a Sprinter  
Attn: Albert Bajrami  
17470 N. Pacesetter Way  
Scottsdale, AZ 85255  
Phone # 480-329-2292

**Thank You!**