

## **Special Accounts**

Please allow up to 5 business days to process your request

## **Contact Information** (please print clearly)

Organization name			Chit delivery contact name	•
Billing contact name			Delivery street address 1	
Billing email address			Delivery street address 2	
Telephone number(s)			City, Province Postal Code	
Event infor	mation_			
Eve	ent Date			
Event Location				
Sta	nrt Time			
End	d Time (approximate)			
Nu	mber of chits requested			
to the driver for each tr  I understand and agree not be responsible for I understand that all ch value and invoice acco Invoices are prepared due upon receipt of ou	rip. The Customer is responsible that the customer is soley re unauthorized use of taxi vouch nits used will be billed to my acordingly. The used chits will be not later than 10 days after the	ele for consible sponsible ers by the count. C scanned e end of the	printed taxi vouchers. An indivious properting the information on the second for the pre-printed vouchers in eorganizations employees, clies as in a Taxi will purchase the tax and images included with your nemonth in which your party had to your invoice.	voucher.  I their care. Casino Taxi will  nts, friends, etc.  I chit from the driver at face  invoice.
Your group may use our Casino request your taxi, see when you office at (902) 425-6666 or (902) nights) and during poor weather are generally longer during these	ur specific cab is assigned, and 2) 429-6666 to place their taxi re conditions, we cannot guarant	I then tra equest. F tee your t	ck your cab on a map, or they Please note that during peak tin axi within a pre-determined am	may call our 24Hr dispatch nes (Friday & Saturday lount of time. Waiting times
If you have any questions regard	ding your account please conta	ict Paula	George directly at (902) 491-19	13 or admin@casinotaxi.ca.
	<u> </u>		e completion of your or xi.ca or fax to (902) 453	
Sic	gnature			ate