

American Dream Vacations Apartment Credit Card Payment Authorization

Please return this form along with the necessary identification **via fax to (973)- 823-8700** or mail to:
American Dream Vacations
75 Route 23 South Suite B, Franklin, NJ 07416

Last Name _____ First Name _____

Address _____

Address _____

City: _____ State/Prov _____ Zip/PostaCode _____ Country _____

Home Phone _____ Work/Cell Phone _____

E-mail _____ Fax: _____

Scheduled Departure date (from home) _____

We will be staying in the (*circle*): **Paris Penthouse Studio Apartment** **Paris Historic 2 Room Apartment**

London # 43 Meridan Ct.

London #41 Daver Ct.

We will check into the apartment on: _____ and depart on _____

We will be staying _____ nights. There will be a total # of _____ people. We will need _____ beds prepared.

Price Per Night _____ x _____ nights = _____

Extra Person Charge (\$10 pp per night) _____ persons x _____ nights = _____

Cleaning Fee (6 nights or less \$90, 7 nights or more \$50) = _____

Key/Damage Deposit (refundable) = **\$200**

Special Handling (regular mail is free) FedEx = \$25 = _____

Total Cost = _____

Credit Card (Visa or MasterCard Only) # _____ Exp ____ / ____

Card holders signature (X) _____ Date _____

I realize that credit cards can be stolen and used to make purchases. To prove that this is my credit card, I have enclosed a copy of my Drivers License with a sample of my signature. I have also enclosed a copy of the photo page of my passport with my signature. A thief may have my credit card and drivers license, but would not likely have all forms of my identification.

American Dream Vacations

London/Paris Apartment Rental Agreement

Please return this form **via fax to (973)- 823-8700** or mail to:

**American Dream Vacations
75 Route 23 South, Franklin, NJ 07416**

I, the undersigned, have purchased an apartment vacation from American Dream Vacations and agree to the terms and conditions as stated below.

I realize that a deposit of \$300 is due to confirm the reservation and that full payment is due 60 days prior to my check in date. I also understand that there is a \$200 key/damage deposit that is to be paid with the final balance. This deposit will be refunded to me within six weeks after I have returned the keys, provided that:

- 1) We leave the apartment at check out time of 9:30 am, so that the cleaning crew can prepare the apartment for the next guests arrival that same morning.
- 2) The keys are to be returned in a timely fashion, within 1 week of our check-out. In the event of the rentals of both London and Paris apartments on the same itinerary, the keys are due back within one week of check out of the last apartment stayed in. Keys must be returned to our office at 75 Route 23 South, Franklin, New Jersey, 07416
- 3) No damage is done to the apartment other than normal wear and tear.

I have also been informed and agree to the cancellation policies listed below.

For cancellations 90 days or more prior to the arrival date there is a \$300 cancellation fee.
For cancellations 60 and 89 days prior to the arrival date, 50% of the total rental costs (\$300 minimum).
For cancellations 59 days or less prior to the arrival date, 100% of the total
These fees whether or not we re-rent the apartment for the cancelled dates.
All cancellations must be made in writing to American Dream Vacations.

American Dream Vacations has recommended that I purchase travel protection and they have provided me with contact information for a reputable company through whom I can purchase this insurance, should I desire to do so.

I agree to the above terms and conditions of the rental.

(X) _____ Date: _____

Name: _____
(please print clearly)