

Piedmont

Premium Finance, Inc.

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ELECTRONIC FUNDS TRANSFER (EFT) PRE-AUTHORIZED PAYMENT AGREEMENT

**To Enroll: Complete the form below, read the Terms and Conditions and sign at the bottom.
Please attach a voided check from the account you will be using to make your payments.**

Customer Name: _____ Quote or Account #: _____

This is my authorization to Piedmont Premium Finance, Inc to automatically draft my checking account in the amount of \$_____ on the scheduled payment due date of each month until my account is paid in full. Below is my checking account information and email address. (All fields below are required)

Name of Bank: _____

Name on Check: _____

Routing Number: _____

Account Number: _____

Email Address: _____

Terms and Conditions

- If an endorsement (positive or negative) has been applied on a policy that we have financed, you give us permission to revise the draft amount on this form and begin drafting the new amount on the next draft date.
- If a draft is returned unpaid by your financial institution for any reason, we may charge and you agree to pay us a returned item fee of \$20.00. We will not accept a personal check to replace a returned draft payment. Replacements must be in the form of a money order or certified funds. We will continue drafting your remaining payments ONCE the returned draft has been replaced.
- If there is a balance due on your finance agreement after the financed policy's expiration or cancellation date, we will continue to draft your account on the payment due date until the balance is paid in full. If the account cancels due to a payment being returned, we will begin drafting your account once all return premiums have been received.
- Anytime you request the draft date to be changed from the scheduled draft date, there will be a \$10.00 convenience fee added to the payment amount.

The undersigned has read and agreed to the Terms and Conditions above.

Sign: _____

Date: _____