



## The Providence Mutual Fire Insurance company electronic payment options.

### Electronic Funds Transfer – It's as easy as 1,2,3

Simply fill in the EFT authorization form on the reverse side of this announcement, attach a voided check and send it in to The Providence Mutual Fire Insurance Billing Department along with your current payment (or give it to your agent). Upon receiving your information, we will arrange with your bank to automatically deduct your monthly payment from the bank account you have specified.

The EFT bill plan includes 10 equal installments. We will send you an EFT Notice of Transmittal showing the monthly amount to be deducted from your account prior to each installment. You can select the date of withdrawal from your bank account from the 5<sup>th</sup>, 15<sup>th</sup>, or 25<sup>th</sup> of the month – it's up to you. You will be able to verify the deduction on your monthly bank statement. Here's why **YOU** should sign up today:

- \* No more check writing
- \* No more trips to the post office
- \* No more stamps to buy
- \* No more installment fees
- \* Avoid cancellation for non-payment
- \* No more lost payments

If you receive a paper bill from us after signing up for EFT, please continue to pay the paper bills as you have done previously. The paperwork for your EFT may not have been received and processed in time before the paper bill was mailed to you.

If you decide you do not want to participate in EFT any longer, please notify your agent or call The Providence Mutual Fire Insurance Billing Department. Please note that we require 30 days notice to make changes to your bank account information or to terminate withdrawals.

If you have any additional questions, visit us at [www.providencemutual.com](http://www.providencemutual.com), contact your independent agent or call a customer service representative toll free at (877) 763-1800.

### Electronic Check Payment

Pay by electronic check on our website. Simply go to [www.providencemutual.com](http://www.providencemutual.com) and follow the instructions to pay by check. You will need a copy of your billing statement and your checkbook. There are no additional fees charged for this service.

### Debit and Credit Card Payments

Simply go to [www.providencemutual.com](http://www.providencemutual.com) and follow the instructions to pay by debit or credit card. You will need a copy of your billing statement. There are no additional processing fees charged for this service.



**APPLICATION AND AUTHORIZATION FORM FOR ELECTRONIC FUNDS TRANSFER**

Policyholder Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Policy Numbers: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Account Holder Name: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

I wish to have my withdrawals made from my:  Checking account  Savings account

I wish to have my withdrawals made on the:  5th,  15th, or  25th day of the month

If you are an existing EFT customer making a change to your bank account information, please initial here: \_\_\_\_\_

**IMPORTANT INFORMATION:**

I/we authorize The Providence Mutual Fire Insurance Company and the financial institution designated to deduct payments from my account through electronic funds transfer. I have an account(s) at the financial institution listed on the voided check, copy of a canceled check or savings account withdrawal slip and for all debit entries have funds sufficient to pay such entries.

Electronic debit entries shall be initiated by The Providence Mutual Fire Insurance Company to pay premiums and other charges for the above listed policies or other policies as authorized and the entries shall constitute my receipt for the transaction(s). No payment to The Providence Mutual Fire Insurance Company shall be deemed to have been made unless and until the Providence Mutual Fire Insurance Company receives actual credit. I also understand that if corrections of the entry are necessary, it may involve an adjustment to my account. I understand that my direct electronic payment of the billing schedule amount will be debited on or after the premium due date indicated on my schedule and that I should continue to pay any paper bills I am sent prior to receiving the schedule.

The Providence Mutual Fire Insurance Company reserves the right to refuse or terminate electronic payment services. The agreement is to remain in effect until The Providence Mutual Fire Insurance Company terminates it or until I notify The Providence Mutual Fire Insurance Company Billing Department in writing. I understand that The Providence Mutual Fire Insurance Company requires 30 days notice should I decide to change my bank account information or to terminate electronic withdrawals.

\_\_\_\_\_  
Printed Name Signature Date

*Please complete this Authorization Form and include a voided check or a savings account deposit slip from your bank account*

**Mail to: The Providence Mutual Fire Insurance Company, Attention: Billing Department, PO Box 6066, Providence RI, 02940**