



Prime Rate Premium Finance Corporation, Inc.

Electronic Funds Transfer (EFT) Pre-authorized Payment Agreement

To Enroll: Read the Terms and Conditions and complete the form below. Please attach a **voided check** from the account you will be using to make your payments.

_____	_____
Customer Name	Prime Rate Account Number
This is my authorization to Prime Rate Premium Finance Corporation, Inc., 57-0785141, to automatically debit my _____ Checking _____ Savings/Bank Account # _____.	
_____	_____
Bank Transit Number	Financial Institution
_____	_____
City	State
_____	SSN / Federal ID#
_____	_____
Customer Signature	Date
I have read and agree to the terms and conditions below.	

Terms and Conditions:

- ◆ Your payment will be deducted from your designated account on the due date assigned on your Prime Rate Finance Agreement. If your payment is due before this authorization is set, you will have to make payment by form of check or credit card. Please call our customer service department to make sure your account has been set up for EFT at 843-669-0937.
- ◆ If corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to your account.
- ◆ If you have a balance due on your Finance Agreement after the financed policy's expiration/cancellation date, we will continue to draft your account on the designated draft date until the balance is paid in full.
- ◆ If any automatic payment is returned unpaid by your Financial Institution for any reason, we may charge and you agree to pay us a returned item fee at the maximum legal amount. We will not accept a personal check to replace a returned draft payment. Replacement must be made in the form of a money order or certified funds.
- ◆ This authorization will be in effect until you notify Prime Rate and your Financial Institution in writing that you no longer desire this service, allowing us reasonable amount of time to act on your notification.
- ◆ You have the right to stop payment of a debit entry by notifying your Financial Institution before the account is charged. If an erroneous debit is charged against your account, you have the right to have the amount of the entry credited to your account by your Financial Institution, if, within 15 days following the date on which you were sent a statement of account or a written notice of such entry or 45 days after posting, whichever occurs first, you give your Financial Institution a written notice identifying the entry, stating that it is in error and requesting credit back to your account.

Please mail this form along with your voided check attached to:
Prime Rate Premium Finance Corporation, Inc.
ATTN: Accounting Supervisor Fax # 866-377-8683
PO Box 100507
Florence, SC 29501