

## **AUTOMATIC ACH PAYMENT OPTION**

Automatic ACH Payments allows you to have the peace of mind that your insurance premiums are paid on time without the hassle. It is optional and designed to make payment more convenient and efficient. American Reliable Insurance Company will initiate the payment transaction and automatically deduct it from the bank account you designate, based on the payment schedule.

### **To enroll in or update an existing Automatic Payment:**

- **Complete the Automatic ACH Payment Authorization Form or call 800-535-1333**
- **Review the terms and conditions**
- **Sign the form, indicating you agree to the terms and conditions**
- **Return the form to American Reliable Insurance Company by one of the following methods:**
  - **Email: [billing@americanreliable.com](mailto:billing@americanreliable.com)**
  - **FAX: 480-483-7513**
  - **Mail: PO Box 6002, Scottsdale, AZ 85261**

Below are highlights of the Automatic ACH Payment Option. For questions not addressed here, please contact American Reliable Billing Department: [Billing@americanreliable.com](mailto:Billing@americanreliable.com) or call 800-535-1333.

- After an initial down payment, the remainder of the premium will be deducted in installments based on the payment schedule selected. The Automatic ACH Payment Authorization will continue at the renewal for the policies selected without interruption to the payment schedule.
- Payments will post on the due date. The actual date of deduction/charge from your bank account will be on or after the due date. This may vary depending on processing times of financial institutions. If the payment due date falls on a weekend or holiday the payment may be executed on the next business day.
- You will receive the payment schedule annually for the coming year in advance of your renewal date. We will provide you with a notice 10 days in advance of your payment date at any time there is a change to your schedule, an increase in payment amount, change in payment plan or a change to banking information.
- The installment fee associated with automatic payments is lower than the installment fee for non-automatic payments for most types of policies. The installment fee may be the same for automatic and non-automatic payments on some types of policies.
- If you have more than one policy with American Reliable Insurance Company you will need to enroll each policy for automatic payments. Only one authorization form is needed – please list all policies to be enrolled on the form.
- You can make changes to your automatic payment enrollment including: bank account changes, due date changes (when applicable) or cancelling enrollment by calling 800-535-1333 or by filling out a new AUTOMATIC ACH PAYMENT AUTHORIZATION FORM and returning it to American Reliable Insurance Company via one of the methods listed above.



**AUTOMATIC ACH PAYMENT AUTHORIZATION FORM**

*All information must be completed in full or this form will not be processed. Keep a copy of this form for your records*  
**INSURED INFORMATION**

**(Check One)**

- Enrolling in Automatic Payments
- Updating existing Automatic Payment Enrollment

**Payment Plan**

(Select an installment Plan based on the plan(s) available on your invoice)

- Annual
- 2 installments
- 4 installments
- 8 installments
- Monthly \_\_\_\_\_ Due Date of Monthly Installment  
(Select 1-28)

\_\_\_\_\_  
Bank Account Holder Name

\_\_\_\_\_  
Bank Account Holder Email Address(es)

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Transit/Routing (ABA) Number (9 digits)

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

- Checking Account
- Savings Account

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

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Additional Policy Numbers

\_\_\_\_\_  
Contact Telephone (include ext.)

**AGREEMENT TO PAY AND AUTHORIZATION FOR AUTOMATIC ACH DEBITS**

**1. Agreement to Pay.** By signing this authorization form, you authorize American Reliable Insurance Company and its affiliates to debit your bank account for the balance of the policy premium in installment amount(s) based on the installment plan selected. The automatic withdrawal will be made no earlier than one (1) day prior to the invoice due date. The amount debited may vary by up to \$1 greater than the amount of the scheduled payment amount without providing additional notification. For any amount over \$1 we will provide you at least 10 days' notice of the varied amount. If the amount debited is less than the scheduled payment amount, the lesser amount will be taken without additional notification.

**2. Modification and Termination.** This authorization will remain in full force and effect until American Reliable Insurance Company receives written notification from you or the financial institution named above at least ten (10) days prior to the payment due date. Such written notification of any termination or modification of the information above must be sent American Reliable Insurance Company, PO Box 6002, Scottsdale, AZ 85261 or to Billing @americanreliable.com. American Reliable Insurance Company will have no obligation to notify you if an automatic payment from your account is rejected or delayed by your financial institution, which may result in the cancellation of your policy(ies) for non-payment and termination of this authorization in the sole discretion of American Reliable Insurance Company. American Reliable Insurance Company, in its sole discretion, may remove any policy from this authorization at any time and for any or no reason.

**3. Miscellaneous.** Except as expressly required by the Electronic Funds Transfer Act and Regulation E of the Federal Reserve, regardless of whether any claim is based in contract, tort or otherwise, American Reliable Insurance Company shall not be liable: (i) for any exemplary, special, incidental, indirect, consequential or punitive damages in connection with this authorization, regardless of whether or not such damages were foreseeable; or (ii) as a result of any delay, error or omission by any financial institution, electronic funds transfer system, operator or third party service provider. Each party shall bear all of the respective fees and other charges assessed by its designated financial institution(s). American Reliable Insurance Company reserves the right: (a) to adjust future authorized automatic debit entries from your account if any authorized automatic debit entry previously made is found to be duplicative, processed incorrectly, not at all, in excess of, or less than the required amount, (b) to choose the system used to process automatic bank entries and any third-party service provider it may use, and (c) to initiate debit or payment entries and adjustments from any authorized automatic debit entries made in error. American Reliable Insurance Company is entitled to rely upon the information supplied by you. Each automatic debit from your checking account or savings account, as applicable, will be made in accordance with the information you have provided us, or as any person purporting to represent you may otherwise specify in written notice received by American Reliable Insurance Company. American Reliable Insurance Company will not be responsible for any loss arising by reason of any error, mistake or fraud with regard to such information and shall be under no obligation to verify the authority of any person who purports to act on your behalf.

\_\_\_\_\_  
Signature of Authorized Signer

\_\_\_\_\_  
Printed Name of Authorized Signer

\_\_\_\_\_  
Today's Date