

Account Bill Agreement

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Account Information	Today's Date		Agent Name		Agent Number		
	□ New Account		Account Bill Number (TBA)		Preferred due date (Choose day of month)		
	☐ Add to Existing Account			, ,			
	Insured Name						
	Insured Mailing Address						
	Billing Name Billing Mailing Address (If different from Insured Mailing Address)						
Policy Information See Reverse Side						Optional (See Reverse)	
for Explanation of Terms	Policy Type or Number	Effective Date	Term 6 mo/12 mo P	Total olicy Prem.	* 2 Months Down	Estimated Mo. Install	
				· · · · · · · · · · · · · · · · · · ·			
						+ \$3.00 s/c	
			Total Do	own Payment =			
	Down payment must accompany this Agreement. Please make check payable to Unigard Insurance Group.			effective date,	* If application is being submitted more than 10 days after effective date, please include an additional month in the down payment. Please allow for mailing and processing time.		
Automatic Bank Deduction	Please put this account on automatic bank deduction "Checksaver" plan.				Unigard will notify me in writing of the amount of the first deduction and will notify me whenever the amount changes.		
	By marking the "Chec	ksaver" Box I autl	norize Unigard to	I have the right	I have the right to recover the amount of any erroneous		
	, , ,	, ,	pank account I autho-		Unigard deduction, either through a credit to my account or		
	rize the financial ins is drawn to accept t		h my enclosed check nitiated by Unigard.	through direct	through direct reimbursement.		
	Important: be sure t	o pay any billing	notices you might	notifying Uniga	I have the right to terminate this authorization at any time by notifying Unigard in writing 20 days prior to the next draw date.		
Insured's Signature	Insured's Signature		mation. everse side and agre		conditions.		

Account Bill Agreement

Explanation of Terms

Calculating Estimated Monthly Installment:	Six Month Policy: Premium divided by 6 = monthly installment			
instailnent.	Twelve Month Policy: Premium divided by 12 = monthly installment			
	Add estimated monthly installment column then add Service charge to get total estimated monthly bill.			
Down Payment	The total down payment must accompany this application. The down payment is equal to 2 monthly installments.			
Installment Plans	One year policies: The down payment is required. The remaining balance will be billed in 10 equal installments. A minimum premium of \$60.00 per policy is required to qualify for account billing.			
	Six month policies: The down payment is required. The remaining balance will be billed in 4 equal installments. A minimum premium of \$30.00 per policy is required to qualify for account billing.			
	Note: Any under-payment will be billed in full on your first installment.			
Partial Installments	If a monthly installment received by the company is less than the minimum payment required, the money received will be applied to the policies in the order listed on your last bill, unless you instruct us otherwise at the time the partial installment is made. Under payments or late payments may result in late charges being billed.			
Due Date	You may choose the day of the month you would like your bill to be due. If no selection is made the due date will be assigned by the company. Billing notices are issued 20 days prior to the due date. The Account billing date does not alter the effective date of individual policies.			
Renewal Billings	As your policies renew they will be added to the account as follows:			
	The down payment will be billed in two monthly installments. Your first renewal billing is issued 50 days prior to your renewal date.			
	Six month policies: The first half of your down payment is an estimate based on your current policy premium. The second half of your down payment will reflect the actual renewal premium. After your down payment is received by the company, you will be billed for the remaining balance in 4 equal installments.			
	Twelve month policies: After the down payment is received by the company, you will be billed for the remaining balance in 10 equal monthly installments.			
Endorsements	Endorsements which generate an additional premium are added to any outstanding balance. Endorsements may increase or decrease future monthly installments.			
	To provide you with continued coverage, please pay the minimum amount due even if the amount does not yet reflect recent changes to your policy.			
Credit Balances	If a return premium creates a credit balance on an individual policy, that credit will be applied to the account balance. Refund checks will be issued for credit balances resulting from the closure of an account.			
Cancellations	Late payments may result in a Notice of Cancellation for non-payment of premium. Each policy will be reviewed to determine if a cancellation notice should be issued.			