

A Simple Option for Direct Bill Payment

So you can cross one item off your To Do List - for good!

CNA offers a convenient **Automatic Payment Option** to have premium payments withdrawn directly from your bank. No more writing checks, making sure they're mailed on time, or worrying about missed payments when you're away from the office.

It's Simple:

Schedule Automatic Payments Based on Your Installment Plan

Enjoy the convenience

Automatic payments will be withdrawn from your bank account based on the payment due date shown on your invoice. Just complete and send us the authorization form in this brochure by mail or fax.

Start now to benefit from this time saving offer

- free yourself from the worries of a late or missed payment and late fee.
- Save on applicable fees per installment.



Frequently Asked Questions

Q. How will I know when the automatic payments have begun?

You should continue to call us to make telephone payments, or pay by check, until your enrollment is complete. Automatic premium payments will begin after a letter confirming enrollment is sent to you and automatic payment is indicated on your statement.

Q. Will I receive notice of withdrawal before it is made from my bank account?

A. Yes. For your review and records, we will continue to send a statement showing the amount of your automatic withdrawal prior to the withdrawal date.

Q. Is there a fee for the automatic payment service?

A. No, CNA does not charge fees for the convenience of automatic bill payment, and any applicable fees per installment may be reduced. You should check with your bank to determine if bank fees apply.

Q. When will the money be withdrawn from my bank?

A. Scheduled payments will be withdrawn from your bank account on the due date shown on your statement. Please note that invoiced amounts may include audit, endorsement and deposit premium.

Q. How do I change a payment amount?

A. Your scheduled payment will automatically reflect the amount due on your statement. You may call the Direct Bill Call Center at least four days before the due date shown on your statement to report a discrepancy or make a change.

Q. Do I need to reapply for scheduled payments when my account renews?

A. Automatic payments will continue as long as your CNA account is active. If you have cancelled your coverage with CNA, or should you choose to cease making automatic payments, please instruct CNA to cancel your enrollment at any time by checking the cancellation box on an enrollment form, or by calling the Direct Bill Call Center toll free at 877-276-7507.

CNA offers a convenient way to make premium payments directly from your bank account:

Enroll now to make Scheduled Automatic Payments based on your Installment Plan.

Complete this form to make scheduled automatic payments from your bank account on the due date shown on your statement. Please note that payment amounts may include audit, endorsement and deposit premium. You will receive written confirmation of enrollment and any changes you request.

Please include voided check

Date

you request.			
☐ New enrollment	\square Change enrollment, effective $_$	Cancel enrollment, effective	
A. Your CNA Accour	nt Information		
Company Name (as it appears on your CNA invoice)		CNA Account Number (10 digits)	
Contact Name		Contact Phone Number	
B. Your Bank Inform	ation		
Bank Name (US only)		Checking Savings Account Type (circle one)	;
Bank Account Number		Bank Routing Number	
C. Authorized Signa	tures		
(our) account indicated above a way affects the terms of the po back of my invoice will continue premium is not paid when due,	its affiliates and subsidiary insurers (hereafted the financial institution named above for policy, other than the mode of payment, and the to apply. I understand that if funds are not then the policy or polices may be terminated my financial institution may charge as a resulting the financial institution may charge as a resulti	remium payments due to CNA. I a hat the terms and conditions of the available in my (our) account on t d in accordance with policy provisi	agree that this Authorization in no e Direct Bill Program outlined on the he designated withdrawal date and ions. I further understand that CNA
Bank Account Authorized Signe	r (please print) Title	Signature	 Date

This authority remains in full force and effect as long as your CNA account is active or until CNA has received written notification of its termination in such time and such manner as to give CNA and the financial institutions a reasonable opportunity to act. To change the amount of your withdrawal, please contact CNA at least four days before the due date on your statement.

Signature

D. Submitting Your Enrollment

Bank Account Authorized Signer (please print)

Please submit this enrollment form, along with a copy of a voided check, to the CNA mailing address or fax number indicated below. For security reasons, we cannot accept enrollment via e-mail. Please continue to pay by check or telephone (by callling the Direct Bill Call Center) until you receive your first statement showing the amount of your upcoming automatic withdrawal. You will receive a statement for each automatic withdrawal before a withdrawal is made.

Mail: CNA Fax: 610-208-6214

Title

Automatic Premium Payment Plan P.O. Box 16020

Reading, PA 19612-6020

(To avoid delays, do not mail enrollment application with payment.)