



SteadPoint Group
2200 Resource Drive St 101
Birmingham, AL 35242
Toll-Free 888-344-8004
FAX 205-980-7805
payments@steadpointgroup.com

Direct Draft Program

Our Direct Draft Program - an electronic fund transfer (EFT) system - is designed to:

- Pay your premium installments for you (which eliminates the cost of issuing and mailing checks).
- Avoid mail delays that can lead to late payments.

By working with our bank's pre-authorized debit program and your financial institution, we will process an automatic debit against your bank account on the scheduled date. All you need to do is provide us with the written authorization form (shown below) along with your bank information, and we'll take care of the rest! Please indicate the type of direct draft you are authorizing. If you select "one-time," a single payment will be processed via electronic fund transfer, but your regular payment methodology will not change. If you choose "ongoing," we will endeavor to send you a notice for each installment of the actual amount to be direct drafted.*** **(Final audits will not be drafted automatically)** Please be aware that any "ongoing use" selection can be rescinded by you at any time. This authority is to remain in full force and effect until SteadPoint Group has received *written notification from you* of its termination in such time and manner as to afford SteadPoint Group and Financial Institution a reasonable opportunity to act on it. Until you take this action, Direct Draft will renew with your policy for you!

If you are interested in taking advantage of this option, please provide us with your completed form by fax or email. If you have any questions, feel free to contact Customer Service for more information. (Our address, fax number, and phone number are shown below.)

Due to the high costs associated with handling delinquent payments, a \$25.00 late fee will be incurred by policyholders in a number of states throughout our operating area each time an installment payment is received five or more days after the due date. By electing to participate in our Direct Draft Program and letting us take care of your premium payments for you, this fee will be avoided.

We send Billing Statements to give you advance notice of each draft amount as a courtesy to you. (The procedure for calculating premium is set forth in your policy.) We cannot guarantee that you will receive this notice or that the notice will be received in advance of the direct draft. Regardless, payment is still due in accordance with your policy terms.

I hereby authorize SteadPoint Group to initiate pre-authorized debit transfers on behalf of my business for (select one)
 one-time use **ongoing use** according to the information outlined below:

Policy(ies): _____
(If this authorization applies to multiple policies, list all. For each include the policy # or application #)

Name of Policyholder: _____

Bank Account#: _____ Bank Routing# _____

Bank: _____
Name City State

Preferred Start Date: _____ Amount (if one-time Direct Draft): _____

Email: _____

Please attach a voided check to assist us in verifying your account information.

Authorized Signature: _____

Printed Name: _____

Date Signed: _____ Phone Number: _____

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