

PRINCE INSURANCE AGENCY PAYMENT INFORMATION REQUEST FORM

Down Payment by Credit Card Request

Please have form completed entirely, signed by insured, and return via fax or email

Name on card _____
Billing Address _____
Phone number: _____
Credit Card Number _____
Card Type (Visa or MC) _____
Expiration Date _____
CIV#: _____
Credit Card fee 3.4%: _____
Bank Routing Number _____
Bank Account number _____
Bank Name: _____
Payment Amount: _____
Check processing fee: .50 cent

Please Note: Credit card transactions are processed through a third party vendor which assesses a non-refundable processing fee per transaction. Credit card transactions cannot be reversed once processed. For e-check there is a 5 day wait until payment has clear your bank and posted with Pia, Inc.

Insured Sign here: _____

Date: _____

By signing above I authority Prince Insurance Agency Inc. to run a payment for the purpose of insurance and services.