

New York Central Mutual Credit/Debit Card Monthly Payments Authorization Form

I authorize New York Central Mutual Fire Insurance Company to charge my credit/debit card for my monthly insurance payments.

Insured's Name (First, Last, MI)

Home Address (Number / Street)

City State 9-Digit Zip

Daytime Phone

E-mail Address

Card Holder's Name (if different from Insured's)

MasterCard Discover VISA

Credit/Debit Card #

Expiration Date

First Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

Second Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

Third Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

New York Central Mutual reserves the right to refuse or terminate your automatic credit card payment service. This agreement is to remain in effect until New York Central Mutual terminates it or receives written notification of its termination and has sufficient time to act on it.

Card Holder's Signature

Date

Return this form to NYCM or your agent.

The descriptions in this brochure do not represent contract terms. Please consult the policy for further definitions and descriptions of limitations and deductibles.

New York Central Mutual Fire Insurance Company is rated "A+" (Superior) by the A.M. Best Company, analysts of the insurance industry since 1899.



Scan with mobile device.



New York Central Mutual Fire Insurance Company
1899 Central Plaza East
Edmeston, New York 13335-1899
800-234-6926

Rev. 01.06.15

On-Track Payments



Security. Service. Simplicity.





Pay your bills with simplicity and convenience

Easier for you

On-Track takes the worry out of making your insurance payments or jeopardizing your coverage with a late or missed payment.

On-Track is automatic!

Your premium is paid automatically through recurring monthly payments or a one time payment from your checking account or credit card.

You choose the date of the month – from the 1st through the 28th – on which your payment is made.

Eligibility

All you need is a checking account or credit card (Master-Card, Discover, VISA) – and agree to be on a monthly payment plan. You can use **On-Track** to pay for one or all of your NYCM policies. Virtually all personal and commercial policies are eligible.

Of course, you must maintain an adequate checking account or credit balance to cover your monthly payment(s).

You can switch back to a conventional payment at any time simply by notifying NYCM or your insurance agent.

Is there a charge?

There is no charge to sign up and utilize the On-Track payment option. This compares to \$5 per installment with conventional billing.

Signing up is easy

Just choose the plan you want by filling out the authorization form and returning it to NYCM or your agent. You can also select your plan within My Account.

Authorization forms are also available from your agent and online at nycm.com.

Include the number of each policy you wish to pay for through **On-Track**.

If you select the checking account plan, please enclose a voided or cancelled check from your checking account.

Payment schedule

Once your authorization form has been approved, NYCM will send you a payment schedule, letting you know how much your monthly installments will be and when they will be withdrawn. You will receive a similar notification any time your policy has a change in the payment amount.

If your checking account or credit card information changes, you can update it in My Account or call our Customer Service Center.

Questions?

If you have further questions about signing up for the **On-Track Payments** program, contact your insurance agent or call our Customer Service Center at 800-234-6926.

New York Central Mutual Electronic Funds Transfer (EFT) Checking/Savings Account Monthly Payments Authorization Form

I authorize New York Central Mutual Fire Insurance Company to charge my checking account for my monthly insurance payments.

Insured's Name (First, Last, MI)

Home Address (Number / Street)

City State 9-Digit Zip

Daytime Phone

E-mail Address

Account Holder's Name (if different from Insured's)

Name of Bank

Bank Address

Bank Routing #

Account # Checking Savings

First Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

Second Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

Third Policy # Preferred Withdrawal Date
(1st thru 28th only) or Policy Effective Date

Return this form with a voided check or copy of a cancelled check from your checking account to NYCM or your agent.

Terms of Agreement: I have an account(s) at the financial institution listed on the enclosed voided or cancelled check sufficient to pay such entries. Electronic debit entries shall be initiated by New York Central Mutual to pay premiums and other charges for the above listed policies or other policies authorized and the entries shall constitute my receipt for the transaction(s). No payment to New York Central Mutual shall be deemed to have been made unless and until New York Central Mutual receives actual credit. I also understand that if corrections of the entry are necessary, it may involve an adjustment to my account.

New York Central Mutual reserves the right to refuse or terminate your electronic funds transfer payment service. This agreement is to remain in effect until New York Central Mutual terminates it or receives written notification of its termination and has sufficient time to act on it.

Account Holder's Signature

Date