



## Electronic Funds Transfer (EFT)

Electronic Funds Transfer payment method is a simple solution for paying your auto and homeowners insurance premiums. By choosing this EFT option, you can pay your installments automatically through a direct transfer from your checking or savings account.

Here's how to sign up for this payment method:

- ✓ Select The Hartford bill plan that best serves your personal cash flow
- ✓ Complete the Authorization Form below and attach a *Voided* check
  - **IMPORTANT:** If the *Voided* check is not attached, EFT cannot be implemented
- ✓ Mail the EFT Authorization Form to the address below.

For a \$2.00 withdrawal fee per transaction, EFT is easy on your budget. Your EFT withdrawals will also be reflected on your monthly bank statements, and you will always be notified in advance about any changes to your withdrawals.

**Important Notice:** Until your EFT request is processed, you'll continue to receive insurance bills in the mail. To keep your account up to date, please remit your check along with the payment portion of the bill.

If you have any questions, please contact our Customer Service Center at 800-624-5578 for assistance.

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### EFT Authorization Information (Please print clearly)

Name:	Bank Name:
Address:	Bank Routing # (9 digits left of your account #):
City, State & Zip:	Withdraw from Checking Account #:
Day time Telephone#: (    )	OR Withdraw from Savings Account #:
Your Policy/Account #s:	Optional: Day of the month would you like your draws to take place? (e.g. 1 <sup>st</sup> , 10 <sup>th</sup> , 15 <sup>th</sup> etc): _____

I / We authorize Hartford Fire Insurance Company and its affiliated companies (hereinafter called The Hartford), to initiate debit entries (withdrawals from) and to initiate if necessary, credit entries (deposits to) and adjustments for any debit entries in error to my (our) account indicated above and the depository named above (hereinafter called Depository) to debit and/or credit the same to such account. This authorization is to remain in full force and effect until The Hartford has received written notice from me of its termination in such time and in such manner as to afford The Hartford and Depository a reasonable opportunity to act on it. I understand I should allow at least (15) days for the first payment to occur.

Signature(s): \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Mail To: The Hartford PO Box 5556 Hartford, CT 06102-5556**

**A VOIDED CHECK MUST BE TAPED (not stapled or clipped) TO THIS FORM. EFT cannot be implemented without a VOIDED check. Deposit Slips are not acceptable.**