TRAVELERS

Recurring Credit Card Billing

Recurring Credit Card

We are pleased to offer you a new payment option – the Recurring Credit Card plan. Now you can have your payment charged automatically to your credit card.

The Recurring Credit Card Plan Offers Many Benefits…

Convenient and Time Saving. The Recurring Credit Card plan is far easier than writing checks. Since the Recurring Credit Card plan is automatic, your bill will be paid whether you're on vacation, traveling on business or just too busy to pay bills.

On-Time Payments. With our Recurring Credit Card plan, you'll have no worries. Your payment is always on time. And you'll avoid late charges.

Easy Sign Up. We accept all cards with the VISA or MasterCard logo. Plus, it's easy to sign up for and easy to cancel.

Here Is How the Recurring Credit Card Plan Works…

You authorize regularly scheduled payments to be charged to your credit card. Then, sit back and relax. Your card will be charged once per month if you select "monthly" or once per policy term if you select "lump sum". As with installment billing plans, a service charge will be assessed for the monthly billing option.

We will send you a notice before your card is charged for the first time. This notice will state the amount and date of your first charge. If the amount to be charged to your card changes, you will receive advance notification before your card is charged.

All You Need to Do…

To take advantage of this service, complete the attached authorization form, and send it to:
Travelers, One Tower Square, Hartford, CT 06183-9045

DETACH AT PERFERATION

Authorization Agreement for Travelers Recurring Credit Card Plan

Name: _____

Policy Number: _____ Policy Number: _____

Policy Number: _____ Policy Number: _____

Select Credit Card: ☐ Visa ☐ MasterCard **Credit Card Expiration Date :** _____ (MM/YY)
Month / Year

Credit Card Account Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Select Payment Frequency: ☐ Monthly ☐ Lump Sum **Indicate Day of Month:** (1st - 28th only) **to Make Payment:** _____

I authorize Travelers* to charge my insurance premium, for the policy number(s) listed above, including any applicable services charges, directly to my credit card. I understand that I may choose to have my card charged monthly or on a lump sum basis and have indicated my choice above. I also understand that this is a recurring authorization and will remain in effect for future policy terms until I provide Travelers with written cancellation. I understand that Travelers and/or my financial institution can cancel my enrollment in this program at any time.

Your Signature _____ Date: _____

When your signed agreement is received, we will mail you a notice showing a schedule of your future payment amounts and dates.

PL-12241 4-05

*The Travelers Indemnity Company and its property casualty affiliates, One Tower Square, Hartford, CT 06183

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Hartford, CT 06183-9045