

# Insured Payment Authorization Form

**One-Time Payment Method** (Select E-Check or Credit Card)

## Insured E-Check (One-time payment / Personal Account Only)

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_

*Select One*

Checking

Savings

## Insured Credit Card (One-time payment)

Name on Card: \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

**NOTE: Amex & Discover not accepted for EZ Flood, Safeco accepts Amex with all other cards**

Card Type: Visa  MasterCard  Discover  Amex  (N/A for RLI)

Card Number:

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Expiration Date:

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CVV Code:

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## Insured Information (All Fields Required)

Named Insured: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

*Select One*

Payment for: Safeco  RLI  Flood  Premium Payment Amount: \$ \_\_\_\_\_



For insured personal payments only. Agency accounts not accepted on this form.

Return completed form via our Secure Agent Portal or via Secured Email only.

[acoelho@massagent.com](mailto:acoelho@massagent.com) / [massagent.com](http://massagent.com)