

Payment Plan Application



5612 Route 34 (South), P.O. Box 430, Auburn, NY 13021-0430 (315) 252-7218
 (FAX) (315) 252-4312

Dear Policyholder:

To help you in paying your insurance premium, Midstate Mutual Insurance Company (MMIC) has fifteen options for premium payment:

1) Direct Bill: You will receive by mail an invoice for each installment showing the amount due and the date due. Payment can be made by check, money order or credit card (VISA/Mastercard/Discover).

2) Automatic Deduction Payment by credit card (VISA/Mastercard/Discover) - see over

3) Automatic Deduction Payment from your checking by Automated Clearing House (ACH) - see over

PLEASE PICK ONE OPTION:					
Number of Payments	Amount(s) Billed	Months Between Payments	1) Direct Bill	2) Automatic Credit Card	3) Automatic ACH (Checking)
1	100% Annual	12**			
3	40% - 30% - 30%	3* - 3* - 3*			
4	25% - 25% - 25% - 25%	3* - 3* - 3* - 2*			
5	40% 1st, 4 at 15%	2* months each			
9	20% 1st, 8 at 10% (Subject to \$150 minimum annual premium)	1* month each			
*Payment Plan Fees:			2009	\$6.00	\$0.00
**No Payment Fee for Annual Payments			2010	\$7.00	\$0.00

If you have selected either 2) or 3) for Automatic payments, you must read and sign the reverse of this letter, and return this whole letter with the following information:

2) Automatic Credit Card: The credit card slip on the back of your invoice toward the bottom, indicating your credit card number and expiration date.

3) Automatic ACH from your Checking Account: To start ACH payments for the first time, send in a check made out to Midstate Mutual Insurance Company with the dollar amount filled in (not a voided check) which will be deposited as a regular check to pay for your first installment. From this check, we will obtain the bank routing number and your account number. All future installments will be made by ACH direct checking withdrawals, which will continue through policy renewals unless you notify us to cancel them.

If you have selected an Automatic plan, please be sure to notify us if you change banks, close the account or the credit card expiration date changes.

PLEASE SEE OVER - PAGE 2

To help you in paying your insurance premium, Midstate Mutual Insurance Company (MMIC) has two new options: *Automatic Deduction Payment by Credit Card or ACH.*

By selecting one of these options, you will receive a schedule of payments on your regular invoice and no other bills will be sent. The entry will post to your Credit Card bill or Checking account. All you have to do is enter the charge into your Credit Card receipt box or Check Register on the specified date.

These are some of the benefits to you:

- No more invoices mailed to your home or business.
- Convenience - No more checks to write or remember to mail.
- Cost Savings - Elimination of check and postage charges.
- Reliability - Even if you are out of town, your payment will be made.

Authorization Agreement for Direct Payments

Yes, I want to enroll in the Automatic Credit Card option and have my payments deducted from my Credit Card (with the enclosed credit card slip) on the payment dates. MMIC will need to be notified if your credit card information changes, including the expiration date.

Yes, I want to enroll in the Automatic ACH option and have my payments deducted automatically from my checking account (with the enclosed deposit check) on the payment dates. The pre-authorized debit will take effect with your next payment. MMIC will need to be notified if your bank account changes. Note: it takes up to ten business to set up ACH. The initial 20% deposit check for a new policy application must accompany the application.

Please check the appropriate box above and read and sign this authorization agreement below. For ACH, be sure to use the checking account you want debited for this pre-authorized payment option.

If for any reason the debit made against your account is not cleared, a non-payment cancellation (which includes a fee) will be sent. ACH will not apply and MMIC will require a certified check, money order or credit card charge to keep your coverage in force. You as the insured will be responsible for any fees or charges MMIC incurred from your bank including but not limited to electronic funds transfer, insufficient funds, incorrect enrollment information, transaction fees, account closed, stop payments. This agreement may be modified or fees may be amended.

I (we) authorize and instruction my (our) financial institution to deduct the amount from my (our) checking account and remit directly to MMIC. MMIC will notify the financial institution of the amount to be deducted. This authorization is to remain in full force and effect for your annual premium and any endorsement that may adjust your debit amount and renewal policies until MMIC has received written notification from me (us) or your insurance policy is canceled. I (we) understand that my (our) financial institution and MMIC reserve the right, upon written notification, to terminate this payment option and my (our) participation.

Name _____
Please Print

Signature _____ Date _____

----- PLEASE BE SURE TO RETURN THIS FORM TO MMIC -----

---YOUR CHECK OR A COMPLETED CREDIT CARD SLIP MUST ACCOMPANY THIS FORM ---