



HOME OFFICE
1538 Howard Access Road
Suite C
Upland, CA 91786

Phone:
800-628-2882
Commercial Lines Fax:
909-266-0359
Personal Lines Fax:
909-942-2764
Health/Life Fax:
909-266-1923

Credit Card/E-Check Authorization

Once completed, please fax over to the appropriate department listed on the left.

Company Name: _____
Policy Number: _____

Please select **ONE** box below:

Credit Card ~ Amount of Transaction: _____ *

Name of Authorized Holder: _____
Credit Card Number: _____ - _____ - _____ - _____
Expiration Date: _____ Billing Zip Code: _____
Security Number on back of card (3-4 digits): _____

E-Check (ACH) ~ Amount of Transaction: _____

Name of Account Holder: _____
Bank Name: _____
Bank Branch City: _____ State: _____ Zip: _____
Account Number: _____
Bank Routing Number: _____

In exchange for insurance services rendered and/or products provided, the undersigned hereby authorizes H2 Insurance Services, Inc. to electronically draft via the Automated Clearing House system or charge via credit card the amount indicated above from the identified account/card. The undersigned hereby certifies that they are duly authorized to execute this form on behalf of the above listed holder. In the case of an e-check(ACH), I acknowledge that I am subject to a \$35 reject fee if items are returned for insufficient funds. *In the case of a credit card charge, I may be subject to a \$25 processing fee.*

Signature of Holder: **X** _____ Date: _____

If choosing ACH, place VOIDED check here.

California
License #0C66703

Nevada
License #18521

Arizona
License #186848

Utah
License #253895