

**Protective Life Insurance Company** 

PO Box 96 Birmingham AL 35201-0096 Phone: 800-568-2001 | Fax: 303-262-5463

Email: ada@protective.com Website: ada.protective.com

## **AUTOPAY: The easiest way to handle premium payments**

## The smart alternative to writing and mailing your ADA insurance checks With

ADA Membershin No.

Autopay, your ADA insurance premiums can be automatically transferred from your bank account in regular installments. Your payment will be received on time, every time, ensuring your valuable coverage stays in force.

Your Autopay withdrawals will begin with the first month of your next regular billing cycle. To arrange for withdrawals from different plans to come from different accounts, please use a separate copy of this form for each account.

Note: Changes to your age, coverage, or a Plan's Premium Credit will affect the amount of premium due in the month that the change takes effect.

We will provide you with written notice of any new premium amount prior to your scheduled withdrawal date.

## Yes! Sign me up for Autopay

Member Name

( ) 1st of the month

( ) 10th of the month (monthly frequency only)

To have your ADA Insurance premiums conveniently withdrawn from your checking account, please complete, detach, and return this form **along with a voided check by Mail/Fax/Email.** 

Wellioer Name	ADA Wemoership No.
Phone	Email
	• Yes! Please sign me up to receive promotional information and announcements from ADA Insurance Plans via email.
Check all products that apply:	announcements from ADA insurance Flans via email.
Please provide individual certificate numbers that apply	Individual certificates for plans checked below will apply unless otherwise noted
( ) Term Life #(s)	( ) Disability Income ( ) Office Overhead Expense
( ) Universal Life #(s)	
( ) Level Term #(s)	
Bank Name	Checking Account No.
Accountholder's Name (if other than yourself)	
Signature of Accountholder (if applicable) Signature	
Signature of Member	Today's Date
Withdrawal Frequency	
( ) Monthly	Monthly Autopayment includes your premium and 2% administrative/processing fee. The
( ) Semi-Annually	first Monthly Autopay deduction will be 2-3 months of premium and 1 month thereafter. Semi-annually or annually paid Autopayments not subject to 2% fee. Autopayment debit made on business day closest to 1st or 10th of the month. Autopay terminates if 1) bank account owner provides Protective Life 30 days written notice; or 2) Protective Life
( ) Annually (Term Life, Universal Life and Level Term only)	
Withdrawal Date	provides 30 days advance written notice to the bank account owner; or 3) if your designated bank does not transfer funds. On termination, lapse notice is sent detailing reinstatement procedures. Should Autopay program terminate, payment method reverts to

standard billing.