



Opciones de Pago (TotalPay) le permite ofrecer múltiples cotizaciones de seguros a su cliente, brindándole la opción de decidir cómo desea pagar su póliza: ya sea a plazos (premium finance) o pagando la prima en su totalidad.

Elegir Opciones de Pago (TotalPay)



- Opción para pagar en su totalidad o financiar la prima (*premium finance*).
- Elegir quién es el titular de la cuenta de pago.

Who is selecting the payment?

Insured selects payment type

I will be paying in full

Who owns the payment account?

Agent

Insured

Método de Pago: ACH

ACH usando la cuenta de la entidad

- Ingrese los datos bancarios.
- Seleccione "Enviar" (*Submit*).

ACH usando la cuenta del asegurado

- Ingrese los datos bancarios.
- Acepte los términos.

El asegurado recibe una notificación por correo electrónico informando que se ha realizado un pago a su nombre.

What is the payment method?

ACH (Checking or Savings Account)

Credit Card

Payment Amount: \$150.00 + \$5.00 Technology fee (Check fee)
Total Amount: \$155.00

Banking Account Information

ACCOUNT OWNER NAME: Demo Check Example

BANK ROUTING NUMBER: 101000019 BANK NAME: COMMERCE BANK BANK ACCOUNT TYPE: Checking

BANK ACCOUNT NUMBER: RE-ENTER BANK ACCOUNT NUMBER: 1234

By clicking "Submit" below, I authorize AndDone, on behalf of ANDDONE TEST AGENCY 2, to initiate a one-time electronic debit in the amount shown from the account and the financial institution identified on this form. I may only revoke this authorization by contacting AndDone at support@anddone.com. This authorization remains in effect until AndDone has had a reasonable opportunity to act on my revocation. I have advised Insured on whether a no-fee option is available. Please print and retain a copy of this authorization.

I certify that I have been expressly authorized by the Insured to act on its (their) behalf in authorizing AndDone to initiate a payment transaction with the payment information provided and payment method designated by the Insured. I agree that the account payment information will be secured and will be properly destroyed when the information is no longer needed.

*Please note transactions will appear as AndDone on the Insured's bank statement.

I agree to and acknowledge the terms below:

- I represent that I have been authorized by the Insured to act on its behalf in authorizing AndDone to initiate an ACH debit entry to the Insured's bank account to pay for the insurance premium payment on my behalf.

Método de Pago: Tarjeta de Crédito

Las transacciones con tarjeta incluyen una tarifa tecnológica del proveedor.

- Ingrese los datos de la tarjeta y la dirección.

Solo Tarjeta de Crédito del Asegurado

- Acepte los términos.

El asegurado recibe una notificación por correo electrónico informando que se ha realizado un pago a su nombre.

What is the payment method?

ACH (Checking or Savings Account)

Credit Card

Payment Amount: \$1,000.00 + \$31.90 Technology fee
Total Amount: \$1,031.90

Credit Card Information: NOTE: Credit Card Information is not stored

Card Number:

Expiration Date: CVC:

Full Name as it appears on your card:

Required fields **

Country:

Street: House number:

Postal code: City:

*Please note transactions will appear as AndDone on your credit card statement.

I agree to and acknowledge the terms below:

I confirm I have been authorized by the Insured, to act on its behalf in authorizing IPFS Corporation ("Imperial PFS") to initiate a transaction to the Insured's payment card account. I understand that this credit card payment will be processed by AndDone and that Imperial PFS neither accesses nor stores credit card account information.

Submit Cancel

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