

# Lehman Insurance Agency

We offer the Best Price as well as coverage to the contractors and other businesses  
O Box 246 Yonkers NY 10705 1-800-339-6415 Fx 914-206-9603 [www.ezratequote.com](http://www.ezratequote.com)

## PAYMENT AUTHORIZATION FORM

Full Payment

Down Payment\*\*



ACH Check - By completing the information below you are authorizing us to make a one time

electronic fund transfer from your checking account \_\_\_\_\_  
in the amount of \$ \_\_\_\_\_ (Routing Number) (Account Number)

A Photocopy of a **BLANK CHECK** can be substituted for the above information. **This signed form must accompany the photocopy.**

**Please Note:** If you have elected to pay by ACH Check, **DO NOT** mail a check. The information above will be used to make a one time electronic fund transfer. If you mail a check your account may be charged twice. We will only be responsible for refunding any over payment and not for any service charges incurred. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day. You will not receive a check back from your financial institution. The withdrawal will be noted as Tapco Underwriters, Inc. on your Statement.

Quote ID: \_\_\_\_\_

Insured Name: \_\_\_\_\_

Insured Signature: \_\_\_\_\_

Agent Name: \_\_\_\_\_

Agent Phone Number: \_\_\_\_\_

Name on Checking Account: \_\_\_\_\_

Address on Account: \_\_\_\_\_



**Credit Card** - By completing the information below you are authorizing us to make a one time charge of \$ \_\_\_\_\_ to the account indicated. **Visa and Mastercard only.**

Quote ID: \_\_\_\_\_

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

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

Credit Card Number: \_\_\_\_\_

3 Digit Verification #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Agent Name: \_\_\_\_\_

Agent Phone Number: \_\_\_\_\_