

**PAY YOUR TOWER GROUP COMPANIES PREMIUM WITHOUT EVEN
THINKING ABOUT IT — AND SAVE EVERY TIME**
Automatic Withdrawal Authorization Form
(Please complete this entire form)

To sign up...

Complete this Automatic Withdrawal Authorization and mail it to the address below or fax to the number below.

Please DO NOT mail this form in the envelope provided for your premium payment — or include your payment with this authorization form.

Policy #1 - Policy Number: _____

Policy #2 - Policy Number: _____

First and Last Name: _____

Address: _____

City, State, Zip: _____

Home Telephone: _____

Email Address (optional): _____

Checking Account Number: _____

Desired Withdrawal Date: _____

(Choose any day except the 29th, 30th or 31st; if you do not select a date, we will use the effective date of your policy.)

Bank ABA/Routing Number: _____

(It's the 9-digit number in the bottom left corner of the check)

Financial Institution Name & Address: _____

Name of Insurance Agency:

Fax to: 866-351-8805

Mail to: Tower Group Companies
Accounting Support – C2-44
One Beacon Lane
Canton, MA 02021

Automatic Withdrawal is Tower's electronic funds transfer service. Sign up today to pay your insurance premium by automatic withdrawal from your checking account. You'll save time and the \$5 fee we charge if you currently pay by check.