



Withdrawal Agreement

I (account holder) accept the terms and conditions outlined below. I authorize Sonnet Insurance Company to debit/credit funds from my account for the payment of the insurance policy/policies purchased.

Your signature confirms:

- You give permission to the noted financial institution (or any substitute thereto which you identify) to debit your account for withdrawals made by Sonnet Insurance Company.
- You understand the terms and conditions of the monthly pay plan.
- You understand your monthly withdrawals may vary if changes occur to your policy premium.
- You understand this authorization is continuous and will automatically apply to the renewal terms, unless Sonnet Insurance Company is instructed differently.
- If you no longer wish to pay by pre-authorized debits through your financial institution, please go to My Account where you can choose from the other payment options available to you.
- You agree to have the necessary funds available to cover the amount of the payments due.
- You understand that, if your financial institution indicates non-sufficient funds (NSF), Sonnet Insurance Company may attempt another account withdrawal.
- You understand that, if your financial institution indicates NSF on the represented withdrawal, an NSF fee may be charged to your account in addition to your monthly payment. A notification will be e-mailed to you advising of a special withdrawal to obtain your insurance premium and another for the NSF fee withdrawal. A payment returned as NSF may result in the cancellation of your policy.
- You may dispute any account discrepancies by providing a signed declaration to your financial institution within 90 days of the withdrawal date.
- You understand that Sonnet Insurance Company will adjust your banking information if notification of change is received directly from your financial institution.

- You understand that Sonnet Insurance Company cannot be held liable for the service charges levied by your financial institution.
- You certify all account information and signatures provided are accurate and agree to inform Sonnet Insurance Company of any changes in the account information at least 10 days prior to the next due date, and that this agreement continues should any new account be used for the withdrawals.
- You agree to the disclosure of any personal information, which may be contained in this agreement, to your financial institution.