



PRONOTE

RECURRING DIRECT DEBIT REQUEST

If you would like to have your monthly payments automatically deducted from your checking account, please submit your information using the form below.

Pronote Account # or Quote #: _____

Insured Name _____

Email _____

Bank Account # _____

Routing # _____

Financial Institution _____

REQUIRED

JONATHAN DOE P.O. BOX 9999 PH. 713-555-5500 HOUSTON, TX 55555		A BANK OF TEXAS, N.A. HOUSTON, TEXAS 33-3333/3333	3333
PAY TO THE ORDER OF	ATTACH VOIDED CHECK HERE		AMOUNT OF CHECK
PAY IN THE SUM OF	_____		VOID AFTER 180 DAYS
000000000	99999999999999	3333	
ROUTING #	ACCOUNT #		

DRAFT INSTRUCTIONS

Number of Loan Payments _____

Amount of each monthly Loan Payment is \$_____. Pronote will withdraw each payment on the due date.

If the payment happens to fall on a weekend or holiday, Pronote will withdraw that payment on the next business day.

CANCELLATION OF DIRECT DEBIT:

Pronote must be notified in writing not later than 5 business days before the next due date. Any debit returned dishonored by the bank will be assessed a \$33.00 return debit fee and will result in the Direct Debit payment option being cancelled for this account.

Please **print, complete, sign** and **mail** this form along with a voided check to 3131 Eastside, Suite 600, Houston, TX 77098 or fax this form along with a voided check to 800.294.0851 (toll free). Pronote must have document and check prior to the withdrawal date.

Insured's signature: _____ Date _____

Thank you for choosing Pronote for your premium finance needs!