## **Loss Indemnity Payment Direct Deposit**



To enroll, follow the instructions and return the completed form to your agent.

- 1. Fill in your account information.
- 2. Sign the form.
- 3. Attach a voided check, **not** a deposit slip, for verification of your account information.

Account verification takes up to **two** business days. After your account information has been verified, direct deposit will begin. Please note that your agent will also be notified of indemnity payments.

The information below will apply to all policies for the policyholder unless otherwise specified.

By signing below, you authorize NAU Country Insurance Company and the financial institution named below to automatically deposit your indemnity payment into your account. This authority will remain in effect until you give written notice to cancel it. Please note that payments cannot be processed as direct deposits if Transfer of Rights of Indemnity or Assignment of Indemnity is in place for the policy.

If you would like to scan and email this form, please send to <a href="mailto:AccountingPayableClaims@naucountry.com">AccountingPayableClaims@naucountry.com</a>. Thank you.

Policyh	older's Information			
Financial Institution		Printed Name		
Institution City/State	S	TIN/SSN/EIN (last 4)		
Transit Routing #		Email		
Account #				
Signatu	ire			
Signature			Date	
·				
	Staple Voided C	Check Here (Checking Account C	nly)	