



Electronic Payment Authorization Form

Please fax your payment to: (858) 724-5280

Or scan and email your payment to:
RPS.SanDiego-2.AR@rpsins.com

HOW TO SEND YOUR PAYMENT:

1. Make your check payable to **Risk Placement Services** for the amount due
2. Attach your signed check in the space provided
3. Sign and date the authorization form
4. Indicate your policy number
5. Fax to: (858) 724-5280 or scan to a readable file (.pdf .tif .jpg) and email to:
RPS.SanDiego-2.AR@rpsins.com
6. Retain this form and the original check for your records

PLEASE ATTACH CHECK HERE

I authorize Risk Placement Services to electronically debit the checking account identified on the attached check for the amount shown as an electronic fund transfer (EFT), completing the payment transaction as though the original check had been physically received. If Risk Placement Services is not able to complete this payment transaction because of reasons beyond our control, I understand any insurance coverage associated with this transaction may not be bound or otherwise provided.

Signature of Authorized Account Signer

Date