



AGENCY SWEEP PROGRAM

This program enables streamlined processing of premium payments made by policyholders to your office. It provides the ability for you to accept premium payments, deposit these payments into your agency's bank account, and authorize us to apply the payments to the policy and draft the total of the payment amounts from your agency's bank account daily via ACH.

Here's how the program works:

1. Enroll in the program by completing an authorization form which provides the necessary information about your bank account and your authorization for American Reliable Insurance Company (ARIC) to transfer funds from your account (see attached Agency Sweep Program Authorization Form).

Upon receiving and processing your authorization form, we will notify you when you can begin using this functionality.
2. When you accept a premium payment in your office, post the payment into PTS using the payment type of "Insured Pay Agent". When prompted, enter the type of payment the insured gave you (check, cash or money order).
3. Deposit the payment into the bank account that you provided to us on the Authorization Form.
4. The payment will post to the policy immediately and is effective the date entered.
5. Payments posted before the 9 pm EST cutoff will be scheduled to be debited from your agency bank account 2 days afterward. An aggregate amount will be debited, which will include all payments authorized since the last ACH transfer.
6. If a customer check is returned to you for insufficient funds or any other reason, you can contact us via email at aric_billing@americanreliable.com or by phone 800-535-1333 to request that the payment be reversed from the policy. Please note your funds will be credited back to the bank account provided with your next ACH transfer, given the ACH transfer is at least equal to the amount of the return. Your agency will be responsible for collecting any insufficient fund or bank service fees that you incur due to the returned payment.
7. You can view an itemized list of payments made by your agency at any time. To view reports with this information, click on the Reports tab in PTS.

To view all payments that have been posted, select Agent Payments Received in the report menu. You will be prompted to enter a date range then select Get Report. The Agent Payments Received report will include all payments posted by your office for the given date range. Click on your agency name to retrieve the detail level report.

To view all Agent ACH payments that have been processed and sent to the bank, you will need to run the Producer ACH report. From the Reports menu, click on Accounting at the bottom of the reports list and then select Producer ACH under Deposit Register. Enter the date range (ACH payments will appear on this report two days after their process date), select the filter for Sweep and then click on Get Report. Click on the corresponding batch # to see the detail level report.



AGENCY SWEEP PROGRAM AUTHORIZATION FORM

PTS System

American Reliable Insurance Company, hereinafter referred to as ARIC, is hereby authorized to initiate debit and/or credit entries electronically or by any other commercially acceptable method through the financial institution indicated below hereinafter referred to as FINANCIAL INSTITUTION, to the account indicated below.

Please print clearly – All information must be completed in full.

AGENCY INFORMATION

<input type="checkbox"/> Direct Bill Policy Payments	
Agency Name	Agency Code(s)
Agency Contact Name	Contact Telephone (include ext.)
Agency Contact Email(s)	

FINANCIAL INSTITUTION INFORMATION

Financial Institution Name	
Transit/Routing (ABA) Number	Account Number

This authority is to remain in full force and effect until ARIC has received written notification from the authorized signer(s) for the account of its termination in such time and in such manner as to afford ARIC and FINANCIAL INSTITUTION a reasonable opportunity to act on it. This arrangement does not affect our primary obligation for payment.

PLEASE ATTACH A COPY OF A VOIDED CHECK OR A DEPOSIT SLIP TO THIS FORM.

If no hard copy checks are available, please provide a bank document from which the account and routing numbers can be validated.

Authorized Signature on Account

Today's Date

Printed Name of Signer