



Account Bill Enrollment

Account Bill Benefits

- ▶ One monthly statement
- ▶ One monthly installment service charge
- ▶ One monthly payment or EFT deduction
- ▶ Choose your monthly due date

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Policies to be enrolled on Account Bill (*minimum 2, maximum 5*):

Primary Policy#: _____ **

Policy #: _____

Policy #: _____

Policy # : _____

Policy #: _____

**The primary policy will be used to:

- Determine the billing method (Standard invoice or EFT)
- Apply the installment service charge
- Provide the mailing address
- Establish due date if none selected

The monthly due date will be based on the primary policy, unless a due date is selected below.

Due Date (1st to 31st): _____

If the insured name and/or address do not match on all policies shown above, please explain:

Please note:

- Accounts on EFT will **not** be on the 12 payment plan
- The number of installments will be 9 or 10, depending on the due date
- The minimum due on any outstanding invoice must be paid before enrollment in Account Bill is processed

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