



100 Erie Insurance Place • Erie, Pennsylvania 16530

## REQUEST TO REMOVE POLICY FROM ERIExpressPAY

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Please remove policy number Q \_\_\_\_\_ from the ERIExpressPay program.

Change my payment plan to: \_\_\_\_\_

Please sign below to authorize this change:

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Daytime phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### PREMIUM PAYMENT PLANS

**PLAN A** — (NO CHARGE) Pay your full annual premium on or before the policy's effective date.

**PLAN B** — (NO CHARGE) Pay one-third of your premium by the policy's effective date, another one-third in 30 days, and the balance one month later.

**PLAN C** — (NOMINAL CHARGE) Pay one-fourth of your premium by the policy's effective date and one-fourth 30 days later. The balance will be due six months from the effective date.

**PLAN D** — (NOMINAL CHARGE) Pay one-fourth of your premium by the policy's effective date and one-fourth every three months thereafter.

**MONTHLY** – (NOMINAL CHARGE) Pay one-ninth of your premium by the policy's effective date. Eight more installments will be due in 30-day intervals.

**Send completed form to Premium Cash Processing or fax 1-814-870-4150**