



NEW SERVICE

APPLICATIONS BY FAX

Unity Financial will now accept insurance applications by fax.

Although we will happily accept new business the traditional way, you can speed the process for issue – and commissions – by faxing the application to us, along with a form by which your pre-need customer authorizes us to charge their bank account for the initial cash with application.

Enclosed is a fax cover sheet with a checklist, which you should use with each application. Be sure to include the assignment form and anything else you would normally mail to us. To avoid delays, please use this program for checks drawn on regular checking accounts only. Money Orders and Cashier's Checks do not work and, in many cases, checks drawn on savings accounts or credit unions will not work either. If the customer has made payment to the funeral home and you wish for us to withdraw funds from the funeral home's bank account, we can do it.

Your customer should complete and sign their check made payable to Unity Financial Life Insurance Company for the amount of the initial payment. Once they have signed all of the normal forms, including the withdrawal authorization, and you have faxed everything to us, you can return their check to them.

Make copies of the attached forms for future use. You may not want to use this new alternative every time but it certainly is faster and cheaper than an overnight delivery.

If you have any questions, please call us. We are proud to be the fastest growing pre-need insurance company in America and new services like this are just part of the reason.

Unity Financial Life Insurance Company

11311 Cornell Park Drive, Suite 200, • Cincinnati, OH 45242
Phone: (513) 247-0711 • Toll Free: (877) 523-3231 • Fax: (513) 247-5040



FAX TO: (513) 247-5040

PRENEED APPLICATION FAX COVER SHEET CHECKLIST

Total Number of Pages: _____

NAME OF PROPOSED INSURED: _____

Before faxing your application(s), complete the following checklist to ensure prompt processing and service:

- Properly signed and completed application(s).**
- Properly signed and completed assignment form.**
- As needed:** Applicable State approved disclosure, copy of the Power of Attorney Document, Replacement Form.
- Check for initial premium.**
- Signed Authorization to withdraw funds.**

Please print clearly:

Faxed by: _____
Name Agent Number

Email Address: _____

Phone Number: _____

Fax Number: _____

Please note: Applications received after 12:00 pm on Friday may not receive same-day issue.



AUTHORIZATION TO WITHDRAW FUNERAL HOME FUNDS

I am submitting an application(s) for insurance as indicated below and the initial payment(s) to Unity Financial Life Insurance Company via facsimile.

By signing this form, I authorize Unity Financial Life Insurance Company to initiate an electronic funds transfer from my bank account according to the terms of the attached check. I understand that my check will be converted to an electronic transaction.

I am aware that my checking account may be debited the same day you receive my fax.

I hereby authorize Unity Financial Life Insurance Company to draw an electronic fund transfer from my checking account for payment of new life insurance. This authorization is for a one time withdrawal from my account.

Application on the life of _____ Payment Amount \$ _____

Application on the life of _____ Payment Amount \$ _____

Application on the life of _____ Payment Amount \$ _____

Application on the life of _____ Payment Amount \$ _____

Name of Accountholder as it Appears on Bank Records

Date

Authorized Signature as it Appears on Bank Records

Date

TAPE CHECK HERE

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AUTHORIZATION TO WITHDRAW FUNDS

Your agent will submit your application for insurance and your initial payment to Unity Financial Life Insurance Company via facsimile.

By signing this form, you authorize Unity Financial Life Insurance Company to initiate an electronic funds transfer from your bank account according to the terms of the check. This means that your check will be converted to an electronic transaction. Your agent will return your original check to you when he/she completes the facsimile transmission.

Please note that your checking account may be debited the same day your agent faxes your check to us.

The below hereby authorizes Unity Financial life Insurance Company to draw an electronic fund transfer from my checking account for payment of new life insurance. This authorizes a one time withdrawal from my account.

Authorized Signature as it Appears on Bank Records

Date

Authorized Signature as it Appears on Bank Records

Date

TAPE CHECK HERE

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