

PAYMENT OF INSURANCE PREMIUMS BY CREDIT CARD // EU 0111

Return this form to Pantaenius Monaco by fax (+377 97 70 12 07), post or mail.

IMPORTANT:

Insurance documents will not be sent until payment has been taken.

If the credit card holder is not the policyholder, please add a copy of the credit card holder's identity card, passport or driver's license.

If you have been invoiced in £ or \$, call us for the equivalent amount in €. Do not convert yourself in order to avoid accounting differences.

Do not forget to fill each field and to sign.

POLICYHOLDER'S INFORMATION:

Customer Name

Customer Address

Post Code City




Customer Number

Customer Signature Date

CREDIT CARD HOLDER'S INFORMATION:

Please debit my card with € (as invoiced) plus payment fees of 1,5% for Mastercard, Eurocard and Visa and 2,75% for American Express cards on this amount in order to cover fees charged to PANTAENIUS by the Credit Card company.

Please debit my card: now when due please tick as appropriate

Card Type:    please tick as appropriate

Name of the Credit card holder (in capital letters)

Card Number

Expiry Date CVC Code

I authorize Pantaenius to debit (on the due date) any further invoiced amount concerning the above mentioned customer number until the expiry date of my credit card.

Yes No

Credit Card Holder Signature Date