



# ACH AUTHORIZATION AGREEMENT

I hereby register with Jencap Insurance Services Inc - Houston the following bank account information intended for execution of ACH debit payments of balances associated with the agency indicated below.

Jencap Houston is to obtain explicit authorization in advance of drawing funds from this account.

This registration will remain in effect until Jencap Houston has received written notification signifying termination of this agreement.

\_\_\_\_\_  
FINANCIAL INSTITUTION                      STATE                      CITY

\_\_\_\_\_  
ACCOUNT NUMBER                      ROUTING NUMBER

\_\_\_\_\_  
AGENCY NAME                      # \_\_\_\_\_  
AGENCY CODE

\_\_\_\_\_  
FULL NAME                      TITLE

\_\_\_\_\_  
SIGNATURE                      DATE

\_\_\_\_\_  
TELEPHONE NUMBER

**Email completed form to: [accounting.houston@jencapgroup.com](mailto:accounting.houston@jencapgroup.com)**

**Please allow up to 24 hours for processing.**

**Check the Jencap Houston Agency Portal to confirm registration.**