



Payment Instructions



Client Name



Contents

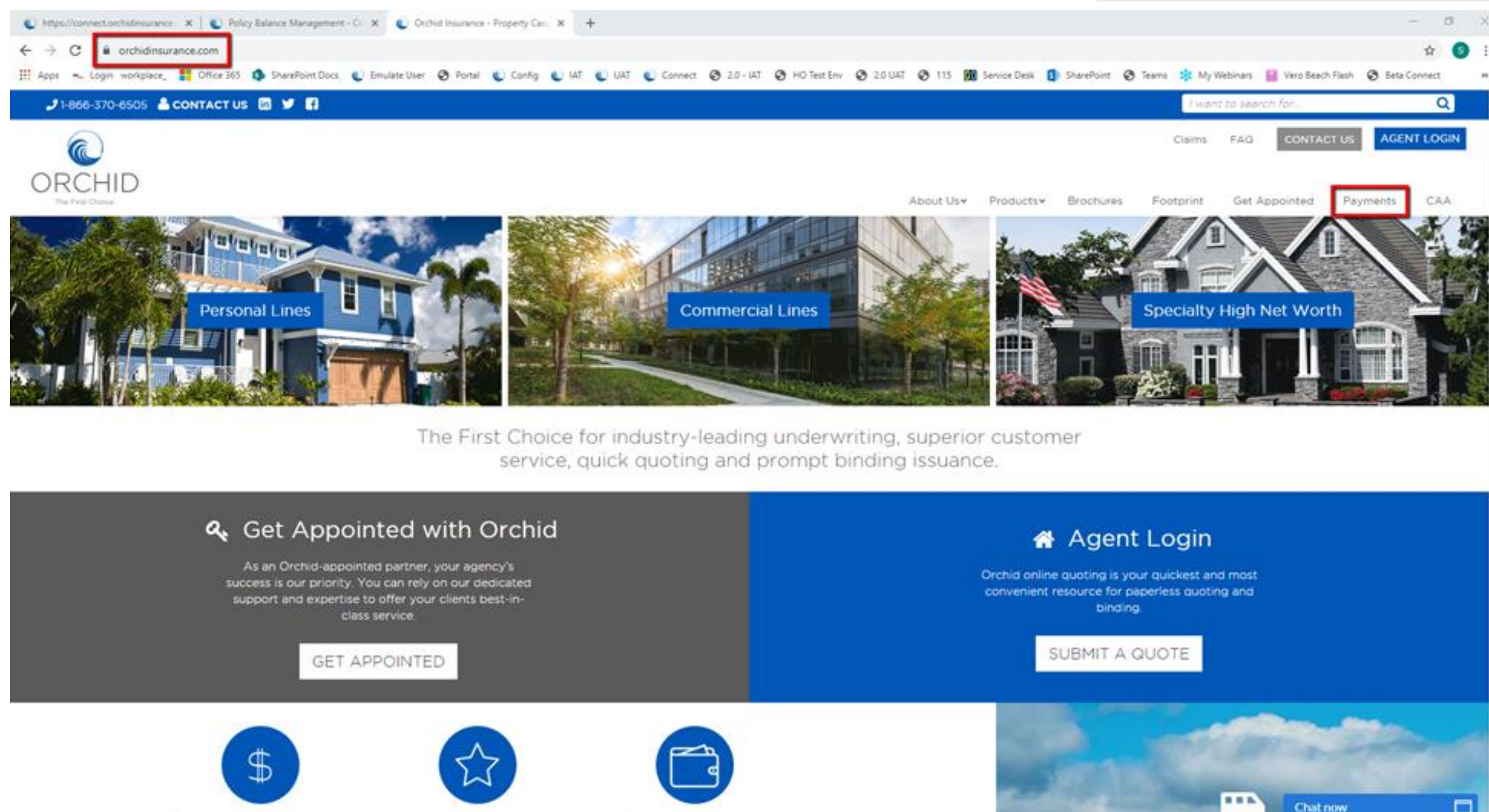
- ▶ Payment Options (Slide 3)
- ▶ Online Check & Credit Card Portal Screenshots (Slides 4-9)
- ▶ Premium Finance Instructions (Slide 10)
- ▶ Premium Finance FAQ (Slide 11)

Options...

Payment Type	Description	Instructions
Online Check	Secure online transaction to draft the premium from the insured's financial institution accounts. No fee	<ol style="list-style-type: none"> 1. Visit our website at: www.orchidinsurance.com 2. Click on the "Payments" tab near top right of the screen 3. Insured will follow prompts to make payment for either option (screen shots on following pages)
Credit Card	Option for insured to pay premium online with credit card. Visa, Mastercard, Amex and Discover accepted. Fee based on carrier; amount will be displayed before submitting the final transaction request.	
Physical Check from Insured or Mortgagee	Physical checks from either the Insured or Mortgagee are accepted can be mailed to Orchid	<ol style="list-style-type: none"> 1. Checks should be made payable to Orchid Underwriters Agency, LLC 2. Standard Mail: Orchid Underwriters Agency Holdings, LLC Dept, #265 P.O. Box 1000 Memphis, TN 38148-1000 3. Overnight Delivery: First Horizon Bank Attn: Orchid Underwriters Whsl Lbx Dept. # 265 3451 Prescott Memphis, TN 38118
Third-Party Premium Finance	A financing agreement can be arranged between the insured and a third party where a down payment can be made and the subsequent installments made payable to the third-party follow. Fees and interest apply and will be noted on the financing agreement	<ol style="list-style-type: none"> 1. Email Orchid Accounting Department at accounting@orchidinsurance.com with a copy of the quote proposal attached that you would like a finance agreement quote on (more info below)

Online Check & Credit Card Screenshots

To make online check or credit card payments, insureds may visit www.orchidinsurance.com and click on the “Payments” tab towards the top right hand corner.



Online Check & Credit Card Screenshots (cont.)

The insured will then fill out the following information in order to make a payment via either method

Payment Options

Start an Online Payment Below

If you have a pop-up blocker enabled, please disable it before attempting to make a payment.

Are you the policy holder or an agency representative?

☒ Policy Holder ☐ Agency Representative ☒ Remember Me

ENTER INFORMATION

CHOOSE AMOUNT

MAKE PAYMENT

CONFIRMATION

Policy Holder Payment

Please fill out all required fields to apply your payment to the correct policy:

Policy Holder Name*

Policy Number*

Email Address*

Confirm Email Address*

Contact Phone Number*

Comments
Additional information about the payment (optional)

cancel

next

If you need assistance, please call the Orchid billing department at 866-370-6505 ext. 605.

Online Check & Credit Card Screenshots (cont.)

The next screen will confirm the amount that the insured owes for verification.

Payment Options

Start an Online Payment Below

If you have a pop-up blocker enabled, please disable it before attempting to make a payment.

Are you the policy holder or an agency representative?

☒ Policy Holder ☐ Agency Representative ☒ Remember Me

ENTER INFORMATION

CHOOSE AMOUNT

MAKE PAYMENT

CONFIRMATION

Choose Payment Amount

Insured Name

Agency Name

Invoice Date	Invoice #	Policy #	Amount Due	Payment Amount
2/13/2020			\$6,007.05	\$ 6007.05
Totals			\$6,007.05	\$6007.05

Comments

Additional information about the payment (optional)

If you need assistance, please call the Orchid billing department at 866-370-6505 ext. 605.

Online Check & Credit Card Screenshots (cont.)

The next screen will allow the insured to select the “Online Check” or “Credit Card” options. Notice the message in the yellow box changes depending on the selection to alert the insured of the additional fees for credit cards.

Payment Options

Start an Online Payment Below

If you have a pop-up blocker enabled, please disable it before attempting to make a payment.

Are you the policy holder or an agency representative?

☒ Policy Holder ☐ Agency Representative ☒ Remember Me

Make Payment

Payor Name [REDACTED]
Apply To Policy/Policies [REDACTED]
Payment Amount **\$6,007.05**
Pay With* ☐ Check Online ☒ Credit Card

Credit card transactions are processed through a third-party vendor (One Inc). PLEASE NOTE THAT THIS VENDOR CHARGES A FEE FOR THIS SERVICE. THE AMOUNT OF THE FEE WILL BE DISPLAYED PRIOR TO SUBMITTING THE FINAL PAYMENT. If you do not want to pay an additional fee, do not make your payment using this method.

Comments
Additional information about the payment (optional)

[cancel](#) [back](#) [make payment](#)

If you need assistance, please call the Orchid billing department at 866-370-6505 ext. 605.

Payment Options

Start an Online Payment Below

If you have a pop-up blocker enabled, please disable it before attempting to make a payment.

Are you the policy holder or an agency representative?

☒ Policy Holder ☐ Agency Representative ☒ Remember Me

ENTER INFORMATION CHOOSE AMOUNT MAKE PAYMENT CONFIRMATION

Make Payment

Payor Name [REDACTED]
Apply To Policy/Policies [REDACTED]
Payment Amount **\$6,007.05**
Pay With* ☒ Check Online ☐ Credit Card

There is no fee associated with this transaction.

Comments
Additional information about the payment (optional)

[cancel](#) [back](#) [make payment](#)

If you need assistance, please call the Orchid billing department at 866-370-6505 ext. 605.

Online Check & Credit Card Screenshots (cont.)

Depending on the payment method, the next screen will either ask for the banking account information or the financial institution information and continue

The screenshot shows the ORCHID 'PAYMENT INFORMATION' screen for a credit card payment. The payment amount is \$6,007.05. The form includes fields for Name On Card, Card Number, Expiration Date (Month and Year dropdowns), Security Code, Billing Address, and Billing Zip Code. Below these fields are 'Cancel' and 'Continue' buttons. The ORCHID logo and 'The First Choice.' tagline are at the top left. At the bottom, there is a 'Privacy Policy and Disclaimer' link and the ONE INC logo.

ORCHID
The First Choice.

PAYMENT INFORMATION

Payment Amount: \$6,007.05

Name On Card: [Text Field]

Card Types Accepted: VISA, MasterCard, AMERICAN EXPRESS, DISCOVER, DEBIT

Card Number: [Text Field]

Expiration Date: Month [Dropdown] / Year [Dropdown]

Security Code: [Text Field] ?

Billing Address: [Text Field]

Billing Zip Code: [Text Field]

Cancel Continue

Privacy Policy and Disclaimer ONE INC

The screenshot shows the ORCHID 'PAYMENT INFORMATION' screen for a banking account payment. The payment amount is \$6,007.05. The form includes fields for Name on Bank Account, Routing Number, Account Number, and Re-Enter Account Number. Below these fields are radio buttons for 'Checking' (selected) and 'Savings'. At the bottom are 'Cancel' and 'Continue' buttons. The ORCHID logo and 'The First Choice.' tagline are at the top left. At the bottom, there is a 'Privacy Policy and Disclaimer' link and the ONE INC logo.

ORCHID
The First Choice.

PAYMENT INFORMATION

Payment Amount: \$6,007.05

Name on Bank Account: [Text Field]

Routing Number: [Text Field] ?

Account Number: [Text Field]

Re-Enter Account Number: [Text Field]

☒ Checking ☐ Savings

Cancel Continue

Privacy Policy and Disclaimer ONE INC

Online Check & Credit Card Screenshots (cont.)

The next screen will be the payment authorization screen finalizing the transaction. For credit card selections, this is where the fee will be disclosed (as shown here on the screenshot). The insured can still cancel the transaction at this time if they do not wish to pay the fee and go back to entering bank information for no charge .

Card Type	MasterCard
Card Number Ending In	8084
Payment Amount	\$1.00
Processing Fee*	\$0.03
Total Payment Amount	\$1.03

[Privacy Policy and Disclaimer](#)

Premium Finance Instructions

Instructions to Obtain a Premium Finance Agreement:

1. Email Orchid Accounting at accounting@orchidinsurance.com
2. The email **must** include the Quote Package along with the following information:
 - Insured Name
 - Phone Number
 - Email address
 - Mailing address
 - Location address (if different)
 - Your agency's name
3. Accounting will supply you with the premium finance agreement.

Premium Finance FAQ

1. If I request a premium finance agreement, does that obligate me to use that plan?

- No, not at all.

2. Is this option available on both New and Renewal?

- Yes

3. Do I have to complete the paperwork for a Premium Finance Agreement (PFA)?

- No, accounting will send you the completed agreement that you will just need to have signed by the insured and return.

4. Do I have to invoice the down payment?

- Yes, as the Producer you are responsible for invoicing the minimum down payment and instructing the insured on how to submit it to us through all of the other payment options us along with the signed PFA.

5. How will my customer make payments to the finance company?

- The premium finance company will send correspondence with information directly to the insured on how to make all future installment payments.

6. Will we receive any notice if our customer does not pay?

- Yes, if payment has not been received 20 days after the due date, the Agent, Insured, and Carrier will be sent a notice of request to cancel.

7. What happens in the case of cancellation?

- If the policy cancels for non-payment, the pro-rata premium will be processed by Orchid and the gross return premium will be sent directly to Premium Finance company to pay off the loan balance.

8. What is the reinstatement process?

- If the Insured brings their account current with finance company within 30 days of the cancellation notice, Orchid will consider reinstatement and notify the Insured and the finance company.