



**ELECTRONIC DEPOSIT OF COMMISSION PAYMENTS AGREEMENT**

To authorize **Agents Service Corporation** to pay any applicable insurance commissions due, please complete this form in its entirety and then submit. Please complete the information below to facilitate processing and let us know if you have any questions. Thank you.

My account information is as follows:

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

Account Name (as it Appears on Statement):  
\_\_\_\_\_

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

Bank Account Type: \_\_\_ Checking \_\_\_ Business Checking

Bank ABA Routing Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

I/We authorize **Agents Service Corporation** to pay any applicable Insurance Commissions due to this agency via electronic deposit to the bank account indicated above. I, the undersigned, am an authorized representative of the named agency shown above. I agree to indemnify the Company for any and all costs and expenses related to any inaccuracy, error or misrepresentation related to this request or to any information contained in this form.

Please submit to:

**Agents Service Corporation**  
8354 Northfield Blvd, Suite 2710  
Denver, CO 80238  
Fax: (303) 512-0575

Email: [sue@piiac.com](mailto:sue@piiac.com)

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

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

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

**Receiving Commission Statements**

Pinnacol Statements can be sent directly to your AMS. Please complete Commission Download Application available on the Pinnacol page on the PIIAC website or request the form from [info@piiac.com](mailto:info@piiac.com). As an alternative, commission statements can be emailed.

All other commission statements for markets accessed through ASC/PIIAC will be emailed.

Preferred Email(s): \_\_\_\_\_