## Entering Electronic Funds Transfer (EFT) Account Information in the Agent Portal

This job aid shows how to add your agency's Electronic Funds Transfer (EFT) information into the TWIA Agent Portal. \*\*\*Please note, only administrators with this capability can update the EFT Agency Information. Organization and Financial administrators can edit EFT information for <u>ALL</u> locations within their agency. Community Administrators can only edit EFT information for their own location.\*\*\*

1. When you log in to the Agent Portal, you will find the Administration Tab in the blue bar at the top of the screen. Click on Administration.



2. Locate the agency you would like to update and click on the agency name.

Catra Meow-Meov	v -				
Primary Location Address 29 MILL ST #5 UNIONVILLE CT 06085	:	Mailing Address: 29 MILL ST #5 UNIONVILLE CT 06085	Primary Contact: Catra Meow-Meow kitty@cmeowmeow.com 860-933-4868	Direct Depos XXXXXXXXXXX 111000614	it: 5789
				+ Agency Organization	n Administrators
Agencies/Locatior	ıs			Search:	
Agency Name	Producer Code	Primary Contact	Phone Number	Email Address	Status
Catra Meow-Meow	2106360W001	Catra Meow-Meow	860-933-4868	kitty@cmeowmeow.com	Active

3. On the far right, locate the EFT Payments section, and click on the pencil to edit the agency's EFT information.

Agency/Location: 0	Catra Meow-Meow		
Producer Code			
Mailing Address 29 MILL ST #5 UNIONVILLE CT 06085	Primary Contact Catra Meow-Meow kitty@cmeowmeow.com 860-933-4868	Status Active	EFT Payments: Inactive



4. Complete <u>ALL</u> fields on the following screen. \*\*\*Please note that Business Savings accounts are no longer eligible for EFT payments. \*\*\*

This information is required by Chase and	d may be used to contact you.	
First Name *		
Last Name *	$\rightarrow$	
E-Mail Address *	$\rightarrow$	
Phone Number *	()	
Address Line 1 *	<b>→</b>	
Address Line 2		
Address Line 3		
City *	$\rightarrow$	
State *	Choose State	Ŷ
ZIP Code *	-	
EFT Payment Enrollment Bank Account information is not required	Bank Account Information  if you are only changing the ETT Payment Enrollment Contact	
	$\rightarrow$	
Account Number *		
Account Number * Confirm Account Number		
Account Number * Confirm Account Number Routing Number	→ 099999999	
Account Number * Confirm Account Number Routing Number Account Category	909999999 Business Consumer	

5. Next, read the EFT Terms and Conditions, check the box to complete enrollment, and click Submit.

	ELECTRONIC FUNDS TRANSFER TERMS AND CONDITIONS
This document covers you you by Texas Windstorm In through the electronic fund severally, agree to the term	and your rights and responsibilities concerning the Electronic Payment via electronic funds transfer ("EFT) services offered to surance Association ("TWIA"). Electronic funds transfers are electronically initiated transfers of money from your account s transfer services described below. By signing a request for EFT service, or using the service, each of you, jointly and s and conditions in the Agreement and any amendments for the EFT services offered.
1. <b>Definitions</b> In this Agreement, the w "our" mean TWIA. The w Monday through Friday of	ords "you" and "yours" mean those who sign the application, joint owners, or any authorized users. The words "we," "us," and ord "account" means any one or more savings and checking accounts you have with banking institutions. Business day means xcluding any holidays on which TWIA and/or our third party financial institution is closed.
2. Service Provider You authorize TWIA to u	se a party to make the authorized EFT withdrawals.
3. EFT Services Upon approval, you may House (ACH), the design Payment transactions re requested after 8:00 pm	use EFT services offered by TWIA. We will only process payments to TWIA. Our bank will withdraw, via the Automated Clearing ated funds from the checking or savings account that you have specified. guested on or before 8:00 pm Central Time will be processed the same day they are submitted. Payment transactions Central Time will be noncessed the following Federal Universe day.
By checking this box, yo	u attest that:
<ol> <li>You desire EFT capabilit</li> <li>Your agency is in the pr</li> <li>You are authorized to er</li> <li>You have read and you</li> </ol>	es for the agency shown above; ocess of registering and is in good standing; ter into banking agreements for the agency shown above; and understand the "Electronic Funds Transfer Terms and Conditions"

6. Lastly, you will see the agency information screen again with the new EFT data saved. If you notice an error, click the pencil again to update the EFT information.

Agency/Location: C	atra Meow-Meow		
Mailing Address 29 Mill.ST #5 UNIONVILLE CT 06085	Primary Contact Catra Meow-Meow kitty@cmeowmeow.com 860-933-4868	Status Active	EFT Payments: Active twia

