



How to Make a Payment on your policy



Have your invoice handy.

This is what the invoice looks like.

You will need **1.** POLICY NUMBER,
2. NAMED INSURED
3. BILLING ZIP CODE.

PLEASE DETACH AND RETURN THIS SECTION WITH YOUR CHECK OR MONEY ORDER IN THE ENCLOSED ENVELOPE.

Please write your POLICY NUMBER on your check: **HO 1234567 01**

Named Insured: **MARY C TEST**

Property Location Insured:
P O BOX 4190
IRVINGTON VA **22480**

Current Balance Due: \$1,324.00
Payment Due By: 06/09/2011
Amount Paid: \$

Change of Address?
Please complete the information below to help us serve you better.

Mailing Address Change Only
 911 Property Location (Assignment/Reassignment)
 Moving to New Location

Name _____
Street _____
City _____
State _____ Zip _____


Method of Payment:
 Check Enclosed - Payable to Northern Neck Insurance Company
 Please charge my VISA/MasterCard for \$ _____
Account #: _____
Exp. Date: _____
Cardholder's Signature: _____

Or, For Your Convenience
Pay by Phone with VISA/MasterCard at 1-800-552-8660

Thank You for Choosing NORTHERN NECK INSURANCE COMPANY! Insured Copy
Post Office Box 419, Irvington, Virginia 22480

It's easy but it takes a few steps. Start on our home page.

SEARCH | FIND AN AGENT | BECOME AN AGENT | AGENT LOGIN | CUSTOMERS


NORTHERN NECK
INSURANCE COMPANY
Insuring Families from the Bay to the Blue Ridge since 1896

CLICK HERE

HOME ABOUT US HOME & AUTO COVERAGE NEWS & INFO CONTACT US

Make a Payment!

We Insure Virginia Homes

We insure responsible homeowners, landlords and renters against loss, harm and liability in suburban and rural Virginia. Because we own homes in Virginia ourselves, we know and understand the particular risks Virginia property owners fear and write peace-of-mind policies to cover them.

We are a "Virginia only" company and we opened for business in the tiny coastal town of Irvington, Virginia in 1896 to insure local homeowners against fire and lightning loss and damage. Today's homeowners, landlords and renters have a lot more to lose. So we don't just insure their homes, we insure their personal possessions, their cars, their boats, their equipment, their home offices, their personal liability, and even their identities.

Whether you live in your site-built or manufactured, single or multi-family home all of the time or some of the time, we provide comprehensive, competitively priced insurance and best in class response when you file a

What We Insure

- Homes
- Condominiums
- Doublewides
- Rural Estates
- Landlords
- Manufactured Homes
- Modular Homes
- Renters

Internet | Protected Mode: Off

Enter Policy Information **exactly** as it appears on your invoice.

NORTHERN NECK INSURANCE COMPANY
Insuring Families from the Bay to the Blue Ridge since 1896

Enter Policy Information Enter required fields exactly as they appear on your policy and click Continue.

1 *Policy Number:

2 *Insured Name:
(enter first Named Insured exactly as it appears on policy)

3 *Billing Zip Code:

4

CLICK HERE

1 POLICY NUMBER: HO 1234567 02

2 NAMED INSURED:
MARY C TEST
HAROLD M TEST
P O BOX 4190
IRVINGTON VA 22480

3 IRVINGTON VA 22480

MAIL TO:
MARY C TEST
HAROLD M TEST
P O BOX 4190
IRVINGTON VA 22480

1 POLICY PERIOD: 05/12/2011 to 05/12/2012

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

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Next click on the **POLICY NUMBER**.



Insuring Families from the Bay to the Blue Ridge since 1886



Policies with a Balance Click the policy link below to pay your policy online.

Logout

Insured Name: SURELY TEMPLE

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Pay Online:

Your payment will not register on your policy immediately. It will be pending on our system for 3 business days. Please call your agent if you need immediate assistance.



Click the policy link below to pay your policy online:

| Policy Number | Policy Type | Effective Date | Expiration Date | Total Bal Due | Current Amt Due | Current Due Date |
|-------------------------------|-------------|----------------|-----------------|---------------|-----------------|------------------|
| HO 0000116 00 | Home | 02/07/2011 | 02/07/2012 | 1379.00 | 1379.00 | 12/22/2011 |

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll Free After Hours

Check the information and then click CONTINUE.



Policy Number Confirmation Click Continue to pay your policy online.

[Logout](#)



Homeowner Policy
SURELY TEMPLE



Policy Number: HO 0000116 00
Policy Term: 02/07/2011-02/07/2012

Premium (includes fees):
Paid to Date:

\$1,379.00
\$0.00

Payment Plan: Direct Bill/10-PAY
Last Payment Date:
Last Payment: \$0.00



To Pay Balance in Full:
Current Amount Due:

\$1,379.00
\$1,379.00

Current Due Date: 12/22/2011

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours

Policy Number Confirmation

You have selected 'HO 0000116 00 ' policy term.

Your payment does not register on your policy immediately. It will be pending in our system 2-3 business days.

Please confirm to assure proper allocation of your payment.

Cancel

Continue

CLICK
HERE

Key in your phone number and e-mail address. Select a Payment Method.



Make a Payment Required fields designated by asterisks. Enter required fields and click Next to continue.

Logout

Homeowner Policy
SURELY TEMPLE

Policy Number: HO 0000116 00
Policy Term: 02/07/2011-02/07/2012

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Premium (includes fees): \$1,379.00
Paid to Date: \$0.00
Payment Plan: Direct Bill/10-PAY
Last Payment Date:
Last Payment: \$0.00
To Pay Balance in Full: \$1,379.00
Current Amount Due: \$1,379.00
Current Due Date: 12/22/2011

*Daytime Phone

*Payment Method
Check

*Email Address

*Re-enter Email Address

Daytime Phone will be used for payment questions only if needed.

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours

Select
Check or
Credit Card

Then
CLICK
HERE

Enter
Phone
Number

Enter E-
Mail
twice



Make a Payment by Check Required fields designated by asterisks. Enter required fields and click Submit Payment to continue.

Homeowner Policy
SURELY TEMPLE

Policy Number: HO 0000116 00
Policy Term: 02/07/2011-02/07/2012

Premium (includes fees):
Paid to Date:

\$1,379.00
\$0.00

Payment Plan: Direct Bill/10-PAY
Last Payment Date:

Last Payment: \$0.00

Pay:

To Pay Balance in Full:

\$1,379.00

Current Amount Due:

\$1,379.00

Current Due Date: 12/22/2011

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Type in
ROUTING
NUMBER,
ACCOUNT
NUMBER,
and NAME
from on
your
check.

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252



*Routing Number

*Account Number

*Name on Account

*Re-enter Account Number

Cancel

Submit Payment

Type in
name.

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Double-check your entry and then hit Submit Payment.



Make a Payment by Check Required fields designated by asterisks. Enter required fields and click Submit Payment to continue.

Homeowner Policy
SURELY TEMPLE

Policy Number: HO 0000116 00
Policy Term: 02/07/2011-02/07/2012

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Premium (includes fees):
Paid to Date:

\$1,379.00
\$0.00

Payment Plan: Direct Bill/10-PAY
Last Payment Date:

Last Payment: \$0.00

Pay:

To Pay Balance in Full:

\$1,379.00

Current Amount Due:

\$1,379.00

Current Due Date: 12/22/2011



Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

***Routing Number**

053207766

***Account Number**

0280055138

***Name on Account**

SURELY TEMPLE

***Re-enter Account Number**

0280055138

Cancel

Submit Payment

Then
CLICK
HERE



Make a Payment by Check. Required fields are marked with an asterisk (*). Fields required to complete your payment. [Pay Now](#) [Submit Payment](#) to continue.

You'll see a PAY NOW button – or you can make changes if needed.

Homeowner Policy: **SURELY TEMPLE** Policy Number: **HO 0000116 00**

My Agent
AGY INC
P O BOX 6
DELTAVILLE, VA
23043
804-776-6082

Premium (includes fees): **\$1,379.00** Payment Plan: **Direct Bill/10-PAY**
Paid to Date: **\$0.00** Last Payment Date:

Pay:
 To Pay Balance
 Current Amount

Payment Confirmation

Pay \$1379.00 on policy HO 0000116 00 from account ending in 5138?

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

*Routing Number:
*Account Number:
*Name on Account:
*Re-enter Account Number:

To pay with a **CREDIT CARD**



Make a Payment Required fields designated by asterisks. Enter required fields and click Next to continue.

[Logout](#)

Dwelling Property Policy
FIONA SHREK

Policy Number: DP 8000148 00
Policy Term: 11/11/2011-11/11/2012

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Premium (includes fees):
Paid to Date:

\$360.00
(\$56.25)

Payment Plan: Direct Bill/4-PAY
Last Payment Date: 11/14/2011
Last Payment: (\$56.25)

To Pay Balance in Full:
Current Amount Due:

\$303.75
\$33.75

Current Due Date: 12/07/2011

*Daytime Phone

*Email Address

*Payment Method

*Re-enter Email Address

Daytime phone will be used for payment questions only if needed.

Cancel

Next

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

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Select either Visa or Master Card from the drop-down box.

Make a Payment by Credit Card Required fields designated by asterisks. Enter required fields and click Submit Payment to continue.

Dwelling Property Policy
FIONA SHREK

Policy Number: DP 8000148 00
Policy Term: 11/11/2011-11/11/2012

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Premium (includes fees): \$360.00
Paid to Date: (\$56.25)

Payment Plan: Direct Bill/4-PAY
Last Payment Date: 11/14/2011

Pay:

To Pay Balance in Full: \$303.75

Current Amount Due: \$33.75

Last Payment: (\$56.25)

Current Due Date: 12/07/2011

*Type of Card

Visa



*Credit Card Number

[Input field]

*Expiration Date

Jan 2011

*Card Verification Number

[Input field]

*Name on Account

[Input field]

Cancel

Submit Payment

Select card type

Customer Services
8660
Fri
6:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

Type in **card number**, select **expiration date**, type in **card verification number** and **name** on the card.

Then click SUBMIT PAYMENT.

Make a Payment by Credit Card Required fields designated by asterisks. Enter required fields and click Submit Payment to continue.

Dwelling Property Policy
FIONA SHREK

Policy Number: DP 8000148 00
Policy Term: 11/11/2011-11/11/2012

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Premium (includes fees): \$360.00
Paid to Date: (\$56.25)
Payment Plan: Direct Bill/4-PAY
Last Payment Date: 11/14/2011
Last Payment: (\$56.25)

Pay:

- To Pay Balance in Full: \$303.75
- Current Amount Due: \$33.75 Current Due Date: 12/07/2011

***Type of Card**

Visa



***Credit Card Number**

4007000000027

***Expiration Date**

Jan 2012

***Card Verification Number**

586

***Name on Account**

FIONA SHREK

Cancel

Submit Payment

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

Make a Payment by Credit Card

Required fields designated by asterisks. Enter required fields and click Submit Payment to continue.

Click Pay Now or make changes if needed.

Dwelling Property Policy
Policy Number: DP 8000148 00
Premium (includes fees): \$360.00 Payment Plan: Direct Bill/4-PAY
Paid to Date: (\$56.25) Last Payment Date: 11/14/2011
Last Payment: (\$56.25)

My Agent:
AGY INC
P O BOX 6
DELTAVILLE, VA
23043
804-776-6082

Pay:
 To Pay Balance
 Current Amount

Payment Confirmation

Pay \$33.75 on policy DP 8000148 00 from account ending in 0027?

*Type of Card
[Visa]
*Credit Card Number
[4007000000027] [Jan] [2012]
*Card Verification Number
[586]
*Name on Account
[FIONA SHREK]

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252



Now you **Authorize** the payment.



Payment Authorization Click Authorize to continue processing your payment. Click Cancel to cancel your payment transaction.

I authorize my financial institution to honor an electronic payment in the amount of \$1379.00 from my account ending 5138. This authority pertains to the Northern Neck Insurance Company Policy # HO 0000116 00. Verify your information carefully. Once authorized, payments requested for the same day cannot be edited or cancelled.

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Your payment does not register on your policy immediately. It will be pending on our system for 2-3 business days.

If you choose Cancel below, then your payment transaction for your policy will be cancelled.



Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

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If you want a receipt, click
PRINT RECEIPT.
You will also receive an e-mail receipt.



Payment Confirmation Click Print Receipt to print a copy of this page. Click Close when finished.

[Logout](#)

Thank you for choosing Northern Neck Insurance Company!

Your payment of \$1379.00 has been applied to your Homeowner policy, Policy # HO 0000116 00. Confirmation # 20111212101853.

Your payment does not register on your policy immediately. It will be pending on our system for 2-3 business days. You will not be able to make other online payments on this policy term while the payment is still pending.

A payment confirmation has been emailed to you.

Please contact your agent for questions regarding your policy and billing options.



Print Receipt

Close

My Agent:

Insurance Agency
1234 Main Street
City, VA 22480
(804)438-6611

Policyholder Services
800-552-8660
Mon thru Fri
8:30am-4:30pm

Toll-Free After Hours
Claims Hotline:
877-968-7252

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You're finished! Be sure to Logout.

Remember it will take a few days for the payment to be processed .

A receipt will be e-mailed to the address you entered.

Thank you for making your payment on-line.

