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## SERVICE FEE AGREEMENT

**As indicated by the signature(s) on this form, I (we) have been advised and have full knowledge that in applying for insurance with Bliss-Marc International Corporation of Illinois, and providing me (us) with insurance coverage, I (we) am (are) paying to Bliss-Marc International Corporation a one time, non-refundable service fee as stated above and as authorized by Section 500-80 of the Illinois Insurance Code. I (we) further understand and agree that should the application for insurance be rejected, postponed, canceled, rated up, or should I (we) elect, for any reason, to withdraw or cancel the application for insurance or request the coverage be canceled or the application be voided, the service charge is fully earned and that no portion of the service charge will be refunded or returned.**

I (we) further agree and understand that if payment for said insurance or application is by personal or business check and should remittance be returned by any **financial institution as non-negotiable** for any reason, I (we) agree that I (we) will be obligated to pay immediately in cash, cashier's check, or money order an additional service fee to Bliss-Marc International Corporation in the sum of Twenty-Five dollars (US \$25.00). **I (we) understand and agree that this is in addition to any premium due and is payable to Bliss-Marc International Corporation regardless of the status of the application or request for insurance service.**

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Signature

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Signature