



**TSG Premium Finance**

18545 Sigma Rd., San Antonio, TX 78258/Ph:210-764-1233/Fax:800-714-7110

**ELECTRONIC FUNDS TRANSFER - EFT DEBIT**

**CANCELLATION REQUEST FORM**

I hereby authorize TSG Premium Finance, LLC, to cancel the authorization agreement for Electronic Funds Transfer (EFT Debit) for the loan listed below:

**DEPOSITORY**

NAME \_\_\_\_\_

BRANCH ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BANK ROUTING NO. \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

ACCOUNT TYPE (select one)      ☐ Checking \_\_\_ ☐ Savings

This is formal, written notification of my request for cancellation. I understand that TSG Premium Finance, LLC, is afforded a minimum of 30 days to process this cancellation request. I will be notified at the email below once my request has been processed.

Name(s) (print) \_\_\_\_\_ Email: \_\_\_\_\_

Date \_\_\_\_\_ Loan ID# \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

Email completed form to [premiumfinance@tsgfinance.com](mailto:premiumfinance@tsgfinance.com) or Fax to 210-764-1266  
Attn: TSG Premium Finance