



Master IICRC Certified
Reg. 129337

AUTHORIZATION & CONTRACT TO PERFORM SERVICES

Customer Name: _____ Date of Loss: _____

Loss Address: _____

City: _____ State: _____ Zip: _____

Insurance Company: _____ Claim Number (if available): _____

The undersigned Customer, being the building owner, owner's representative, or resident, authorizes the Provider identified below to perform any and all necessary content pack out and/or content restoration services on Customer's property located at the property address above, and with respect to items that need to be cleaned at a remote location, to remove and clean such items as necessary.

If, for any reason, Customer receives a check from Insurance Company made payable to Customer for the amount that was negotiated between Exclusively Contents, Inc. and the Insured's Insurance company, Customer agrees to pay Provider immediately upon receipt of the check.

Customer agrees to pay any and all deductibles required by the customer's insurance company to Provider within ten (10) days of Customer's receipt of invoice. Interest and finance charges will be charged at the maximum allowable by law, or at 1.5% per month, whichever is less, on accounts over thirty (30) days past due. Time is of the essence.

Customer agrees that Provider is working for the Customer and not Customer's insurance company or any agent/adjuster.

Property Owned By: _____

Scope of Work: _____

☐ I HAVE READ THIS AUTHORIZATION AND CONTRACT TO PERFORM SERVICES, INCLUDING THE TERMS AND CONDITIONS OF SERVICE ON THE REVERSE SIDE HEREOF, AND AGREE TO SAME.

Customer's Signature: _____

Provider's Signature: _____

Printed Name: _____

Date: _____

Email: _____

WAIVER OF RIGHT OF CANCELATION.

I hereby waive my three day right of cancellation Pursuant to California Civil Code Section 1689.13 because of an emergency due to _____

Initial here to waive right of cancellation _____ Date: _____

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