

PROJECT INFORMATION



Insured(s)/Agent(s): _____

Insured Address: _____

Phone: _____

Email: _____

Insurer: _____

Date of Loss: _____

Policy No.: _____ **Claim No.:** _____

CONTRACT FOR SERVICES/WORK AUTHORIZATION AND DIRECTION OF PAYMENT

Contract for Services: I/we, the above-named insured(s) and owner(s)/authorized agent(s) of the above-listed insured property (“Insured”), authorize and agree for Innova Restoration and Reconstruction (“Innova”) to enter the insured property, furnish all materials, supply all equipment, and provide all labor necessary to preserve, protect, and restore the insured property to its pre-loss condition in accordance with the price and scope of work contained in Innova’s estimate/invoice, which will be provided to me/us, for:

Water Mitigation Mold Remediation Pack-Out Fire Clean-Up Reconstruction/Rebuild

Emergency Services: Insured understands the services provided by Innova may involve emergency services, and as such, it may be impossible for Innova to provide an estimate for services prior to starting work. Therefore, Insured authorizes Innova to start immediately and provide me/us an estimate/invoice for services whenever feasible. Insured relies upon Innova’s expertise and agrees to allow Innova to furnish all necessary services under the circumstances and to pay all amounts billed.

Direct-Payment Authorization: Insured directs and authorizes the above-insurer to make payment and send all insurance proceeds for this post-loss insurance claim directly to Innova. All payments received by Insured shall be immediately delivered to Innova.

Payment Terms: Payment is due upon completion of services. Innova shall be entitled to reimbursement for all costs associated with the collection of unpaid balances (including reasonable attorneys’ fees and costs), as well as all reasonable legal fees and costs associated with any and all claim(s) for damages in connection with this agreement and/or for the enforcement of any of the terms found herein.

Deductible: Insured is aware it will be responsible to provide payment to Innova of the applicable insurance deductible, and unless a separate payment setup is made, Insured shall pay the deductible in full prior to the start of repairs.

Early Termination; Stop Work & Hold Harmless: In the event Innova is unable to fully furnish services in accordance with its recommendations, Insured agrees to release and hold Innova harmless from all liability, and shall defend and indemnify Innova against any and all claims or actions that may result. Insured agrees that it is responsible to pay to Innova the full value of all services that have been rendered, as well as \$1,000.00 for liquidated damages.

I/we have read and understand all of the information outlined above. This agreement is entered into voluntarily, and by signing below, I/we agree to be bound by all of the terms of this agreement.

Signature: _____

Signature: _____

Print Name / Date: _____

Print Name / Date: _____

Consultant’s Name: _____

Consultant’s Signature: _____