

## Letter of Intent (LOI)

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Insurance Company Name  
BlueGrass Roofing, Louisville, KY 40202

I, Jevohn Woods, residing at 27569 main, hereby express my intent to proceed with roofing repairs and related property restoration at the above address, to be performed by BlueGrass Roofing. This letter authorizes direct communication between BlueGrass Roofing and Insurance Company Name regarding my insurance claim (Policy Number: 2746283, Claim Number: 1234543), as outlined in the accompanying Assignment of Benefits and/or Authorization to

### Contact Insurer

1. I retain control over the final approval of the claim settlement and any decisions regarding the

2. BlueGrass Roofing is authorized to manage the claim process, including filing documents,

negotiating estimates, and coordinating with the insurer on my behalf.

This Letter of Intent is effective until I/A or until revoked in writing by me.

Claim Holder:  
Jevohn Woods

Signature:

Date: 2/21/2025

