

# Roofing Contract

## AUTHORIZATION TO CONTRACT INSURER (ACI)

**\*\*Date: 2/21/2025\*\***

### **\*\*Parties:\*\***

- **\*\*Homeowner\*\***: **\*\*Gentry Web\*\***, residing at **\*\*123 main city\*\***
- **\*\*Contractor\*\***: BlueGrass Roofing, 123 Mock Lane, Louisville, KY 40202

### **\*\*Insurance Policy Information:\*\***

- **\*\*Insurance Company\*\***: **\*\*State Farm\*\***
- **\*\*Policy Number\*\***: **\*\*1723463\*\***
- **\*\*Claim Number\*\***: **\*\*N/A\*\***

### **\*\*Authorization\*\***

I, **\*\*Gentry Web\*\***, hereby authorize **\*\*BlueGrass Roofing\*\*** to contact **\*\*State Farm\*\*** on my behalf regarding my insurance claim for property damage at **\*\*123 main city\*\***. This authorization includes, but is not limited to, discussing claim details, providing documentation, negotiating estimates, and coordinating inspections or assessments related to the roofing or property repair work.

### **\*\*Limitations:\*\***

1. This authorization does not permit the Contractor to settle or bind the claim without my prior written approval, unless otherwise specified in a separate agreement.
2. This authorization is valid until **\*\*N/A\*\*** or until revoked in writing by me.

\*(All signatures will be captured through the DocSign interface.)\*

Signature:

A handwritten signature in black ink, appearing to be 'Gentry Web', written over a horizontal line.