## **Roofing Contract**

## ASSIGNMENT OF BENEFITS (AOB)

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

\*\*Parties:\*\*

- \*\*Homeowner\*\*: \*\*Jevohn Gentry\*\*, residing at \*\*123 main city\*\*
- \*\*Contractor\*\*: BlueGrass Roofing, 123 Mock Lane, Louisville, KY 40202
- \*\*Insurance Policy Information:\*\*
- \*\*Insurance Company\*\*: \*\*State Farm\*\*
- \*\*Policy Number\*\*: \*\*1111111111\*\*
- \*\*Claim Number\*\*: \*\*2638472637\*\*
- \*\*Terms of Assignment\*\*
- I, \*\*Jevohn Gentry\*\*, hereby assign and transfer all insurance benefits, rights, and proceeds payable under the above-mentioned insurance policy, related to the repair or restoration of property damage at \*\*123 main city\*\*, to \*\*BlueGrass Roofing\*\*. This assignment includes, but is not limited to, any payments for labor, materials, and other costs associated with the roofing or property repair work described in the contract dated \*\*2/21/2025\*\*.
- \*\*BlueGrass Roofing\*\* is authorized to file, negotiate, and settle the insurance claim directly with \*\*State Farm\*\* on my behalf. I understand that by signing this document, I am relinquishing my right to receive insurance proceeds directly, and payments will be made directly to the Contractor.
- \*\*Conditions:\*\*
- 1. This assignment is effective until the completion of the work or until revoked in writing by me.
- 2. I retain the right to cancel this assignment with written notice, subject to any obligations or liabilities incurred by the Contractor prior to cancellation.
- 3. The Contractor agrees to perform the work in accordance with the terms of our agreement and applicable laws.
- \*(All signatures will be captured through the DocSign interface.)\*

## Signature:

