

# BLUEGRASS ROOFING AUTHORIZATION TO CONTACT INSURER

This Authorization to Contact Insurer ("**ACI**") is intended to grant Bluegrass Roofing (Premier Construction Group, LLC) permission from the undersigned Client/Homeowner to communicate directly with the Client's insurance provider.

This authorization allows Bluegrass Roofing to efficiently obtain relevant insurance claim information, including policy details, claim status updates, adjuster reports, and other pertinent documents necessary for the timely and accurate completion of roofing services. This authorization enables direct negotiation between Bluegrass Roofing and the insurance company regarding the scope of repairs, pricing, and insurance settlements, subject to the limitations outlined in this agreement.

## Identification of Parties

- **Contractor:** Bluegrass Roofing, a DBA of Premier Construction Group, LLC (*hereinafter "Contractor"*)
- **Client/Homeowner:** (*Name and Address to be provided below*) (*hereinafter "Client" or "Homeowner"*)

**Client Name\*:** Jevohn Gentry

**Property Address\*:** 150 e 34th st

**Insurance Company Name\*:** State Farm

**Claim Number\*:** 2353564657

## 1. SCOPE OF AUTHORIZATION

By executing this Authorization, the Client explicitly grants Bluegrass Roofing (Premier Construction Group, LLC) the right to access and obtain insurance-related documentation and information directly from the Client's insurance company. The authorized scope includes, but is not limited to, the following:

- Full access to insurance policy documents relevant to the roofing claim.
- Access to detailed information regarding coverage limits, deductibles, exclusions, and any special endorsements or riders associated with the claim.
- Authorization to obtain copies of all adjuster inspection reports, findings, assessments, and communications related to the roofing claim.
- Permission to receive ongoing claim status updates directly from the insurer or its representatives.



The Client authorizes Bluegrass Roofing to use this information solely to evaluate, plan, and perform roofing services and negotiate fair and timely settlements with the insurer, subject to the limitations outlined herein.

## **2. COMMUNICATION AND NEGOTIATION AUTHORITY**

By signing this Authorization, the Client explicitly empowers Bluegrass Roofing (Premier Construction Group, LLC) to act as the authorized representative concerning communications and negotiations with the Client's insurance company, specifically related to the roofing claim identified herein. The authority includes the following permissions:

- The Client expressly authorizes Bluegrass Roofing to contact, communicate, and correspond with insurance adjusters, representatives, or other relevant personnel involved with the claim.
- The Client authorizes Bluegrass Roofing to negotiate the insurance company's terms regarding the scope of repair work, pricing, material selections, and other claim-related terms.
- Any negotiated settlement amounts are subject to the client's final approval unless the Client has executed an Assignment of Benefits (AOB) that transfers final approval authority to Bluegrass Roofing.

This authority is granted exclusively for purposes directly related to resolving and facilitating the completion of the roofing services covered by the insurance claim.

## **3. LIMITATIONS ON AUTHORITY**

The Client expressly acknowledges and agrees that the authority granted to Bluegrass Roofing (Premier Construction Group, LLC) to communicate and negotiate with the Client's insurance company is subject to the following conditions and limitations:

- Unless the Client has executed a separate Assignment of Benefits (AOB), Bluegrass Roofing's authority to negotiate claim terms is limited.
- Bluegrass Roofing may negotiate and present settlement offers from the insurance company, but final acceptance, approval, or rejection of any settlement amount or claim terms remains solely with the Client.
- If the Client executes an Assignment of Benefits (AOB), Bluegrass Roofing's negotiation authority expands to include:
  - Bluegrass Roofing will be authorized to independently accept, finalize, and execute claim settlements with the insurance company without further Client approval, as detailed explicitly in the AOB.

The Client acknowledges understanding of these conditions and affirms that they have read and comprehended these limitations regarding Bluegrass Roofing's authority.

## **4. CONFIDENTIALITY AND PRIVACY**



Bluegrass Roofing (Premier Construction Group, LLC) is committed to protecting the confidentiality and privacy of the Client's personal information. By executing this Authorization, the Client explicitly consents to the following:

- The Client authorizes Bluegrass Roofing to exchange and disclose specific personal and claim-related information with the Client's insurance company solely for the insurance claim and roofing project purposes.

The information explicitly authorized to be shared includes, but is not limited to:

- Client's Name and Address
- Insurance Company Name and Claim Number

Bluegrass Roofing agrees to handle all personal and claim-related information in compliance with applicable state and federal privacy laws and regulations. The personal information shared will be strictly limited to what is necessary to facilitate communications, negotiations, and the resolution of the insurance claim related to the roofing project.

The Client acknowledges understanding of the types of information shared and consents to such sharing, as outlined in this Authorization.

## **5. DURATION AND EXPIRATION OF AUTHORIZATION**

The authorization granted to Bluegrass Roofing (Premier Construction Group, LLC) by the Client under this agreement is subject to the following duration and termination conditions:

- This authorization shall become effective immediately upon the date it is signed by the Client (the "*Effective Date*"), as indicated below.
- The authorization provided herein shall expire and terminate automatically under the following conditions:
  - This authorization will remain valid until the roofing project specified in this document is completed and Bluegrass Roofing has received final payment in full from the Client or insurance provider.
  - The Client reserves the right to revoke this authorization at any time by providing written notice to Bluegrass Roofing.
  - Upon receiving such notice, Bluegrass Roofing will cease communications with the insurer immediately, except for any actions necessary to conclude work already initiated or to finalize any ongoing claim-related negotiations unless otherwise agreed.

The Client acknowledges having read, understood and agreed to these terms regarding the duration and expiration of this authorization.

## **6. PRICE GUARANTEE (CONDITIONAL UPON AUTHORIZATION)**



Provided the Client executes this Authorization to Contact Insurer (ACI), Bluegrass Roofing (Premier Construction Group, LLC) guarantees that the roofing services will be completed for the final scope of work and pricing approved by the Client's insurance provider. Under this guarantee, the Client shall be solely responsible for payment of their insurance deductible and any unrecoverable depreciation as outlined in their insurance policy. No additional fees or costs will be charged unless explicitly agreed upon in writing between the Client and Bluegrass Roofing.

This Price Guarantee is valid only upon the Client's full cooperation with Bluegrass Roofing's efforts to communicate and negotiate directly with the insurer, as authorized by this agreement.

By signing below, the Client acknowledges having read, understood and agreed to all terms outlined in this Authorization to Contact Insurer (ACI). The Client explicitly consents to grant Bluegrass Roofing (Premier Construction Group, LLC) the authority detailed herein, including access to insurance-related information, direct communication with the insurer, and negotiation authority, subject to the stated limitations.

**Client/Homeowner 1**

**Homeowner 1 Printed Name\*:** Jevohn Gentry

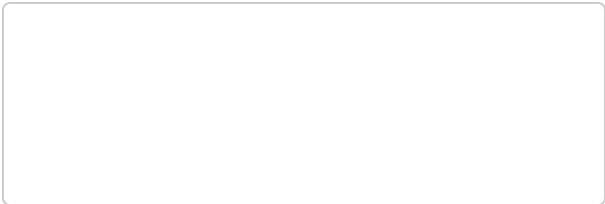
**Homeowner 1 Date\*:** 2025-05-20

**Signature\*:**



**Client/Homeowner 2 (if applicable)**

**Signature:**



**Contractor Representative**

**Contractor Rep Printed Name:** Testing Doe

**Contractor Rep Date:** 2025-05-20

**Signature:**



**Title**

**Contractor Rep Title:** Boss