

MDL Restoration, Inc. 606 Wm Leigh Dr Tullytown PA 19007

24 Hour Emergency Services

Certified Cleaning and Restoration Services Air Ducts, Fire, Smoke Odor, Water, Mold Biohazard Damage or Crime Scene Cleanup

Office 215-943-3382

Fax 215-547-0883

Toll Free 866-576-1142

Emergency 215-630-5861

www.mdlrestorationinc.com

PA HIC# 009221 NJ HIC #13VH06354800

Emergency Work Authorization

on	horize MDL Restoration, Inc. (MDL) to proceed with the Emergency Work as described below and as needed to protect the erty and minimize the damages arising from the loss that occurred loss that occurred
Name	e: Leigh Harrilla
Maili	ng Address 1825 Willow Ave, Willow Grove, PAIGODD
2000	Addiess .
	ance Company: Frie Claim Number: A0000 3141879
Home	e#:Cell Number:(267) 261-9127
1. 2. 3. 4. 5. 6. 7.	I understand that emergency work is intended to secure the property and protect it from any further loss and may include board up, cover up, pumping, dry out, dehumidification, deodorizing, cleaning, debris/contents removal, temporary storage, and related services as described in the Schedule of Services provided with this document. I understand that Emergency Work is separate from 'Home Improvement' or 'Restoration Service' which may be the subject of a separate proposal and agreement, if desired by me. I understand MDL will present its bill for the Emergency Work to my Insurance Company for direct payment. I agree to pay MDL the amount of my deductible and any other amounts not paid by the insurance company. I agree to sign check drafts, or documents that may require signature for payment to MDL for this Emergency Work. I agree to make all payments for work performed by or at the direction of MDL Restoration immediately upon Owner's receipt of each invoice from MDL Restoration, Inc. I agree to make final payment of all remaining amounts immediately upon completion. Interest on any unpaid balance shall be charged at the rate of 0.5% per month. I shall be responsible for reasonable attorney's fees and costs in the event that collection efforts (including legal action) are required to colle any unpaid balance. MDL Restoration does not warrant that it shall completely remove any mold, or that, any mold remaining after completion of the work, will not multiply or recur. It is fully understood that I/We am/are personally responsible for any and all deductible, depreciation or any other charges or costs not covered by insurance.
8.	event shall MDL Restoration, Inc., its agents or assignees, be liable for consequential damages of any kind. In the event that payment is made directly to you from your insurance carrier on behalf of MDL Restoration, Inc., payment is to be forwarded immediately to MDL Restoration, Inc. at 606 Wm Leigh Dr., Tullytown PA 19007 upon receipt.
9.	You, the buyer, having initiated the contract for the goods and services of MDL Restoration Inc., the seller, for the remediation of a bona fide emergency hereby authorize the seller to immediately proceed with the delivery of goods or the performance of services necessary to remedy the bona fide emergency. By providing the seller with this authorization, you agree to make full payments for the goods or service provided. You agree not to exercise the rights afforded you by the Unfair Trade Practices and Consumer Protection Law to cancel the contract within three business days from the above date. You, the buyer, attest that the attached estimate is an accurate description of the goods and services which will be
	provided by the seller for the correction of the bona fide emergency:
uthori	ization to begin work hereby granted:
	ame: Leigh Ann Harvilla Signature.
nitials:	I acknowledge that I have received a copy of the Schedule of Services and Certificate of Insurance.
rint Na	ame (MDL Restoration Inc. Seller):
ignatu	re:Date:

Cancellation" form and oral notification of the right to cancel. The Bureau of Consumer Protection's toll free number: 1-888-520-6680