



## **CERTIFICATE OF COMPLETION**

FM-7004

**Claim Number:** \_\_\_\_\_

**Insured Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

I, the undersigned insured, hereby certify that the services performed by Royal Restoration Pro have been completed to my satisfaction and that the property has been thoroughly dried and returned to normal moisture levels.

**Customer Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_