

CERTIFICATE OF SATISFACTION

I/We, _____ (“Customer(s)”), have thoroughly reviewed the mitigation work performed by H2O DAMAGE LLC (“Contractor”) at my/our property located at:

Address	City	State	Zip Code
---------	------	-------	----------

By my/our signature below, Customer(s):

- Confirm(s) that all work was performed and all materials were provided by Contractor in accordance with the contract executed on _____ [contract date] including change order(s), if applicable, and to my/our complete satisfaction; and
- Expressly authorize(s) my/our insurer, _____ [Insurance carrier name],
- To issue payment promptly and directly to Contractor

SIGNATURE OF INSURED and/or its AUTHORIZED REPRESENTATIVE

Print Name: _____

Date: _____

SIGNATURE OF WITNESS:

Print Name of Witness: _____

Date: _____

Tax ID # 84-315077