Declaration of Intent to Repair

This form is required for Insurance claims $20,000 and more.

Loan Number:_____

Borrower name:_____

Borrower name:_____

Property Address:_____

_____

Email address:_____

Phone number(s):_____

Insurance Information:

Insurance Company:_____

Amount of claim:_____

Cause of damage/loss: _____

_____

Contractor Information:

Company Name:_____

Company Contact:_____

Company Address:_____

Contact Phone Number:_____

Contact email:_____

I/We certify that the insurance claim funds in the amount listed above are to be used to repair the property to as good a condition or better prior to the damage, that all repairs will be completed in a timely manner and that no material or labor liens will occur as a result of this insurance claim.

I/We understand that a licensed contractor must be used to repair the property.

_____ _____

Borrower Date Borrower Date