

Renaissance Adjusting, Inc.

Date _____

This Contract is entered into under the permanent resident public adjuster license stated below and

_____ herein referred to as The Insured.

The insured's residence is _____

The Insured has suffered _____ loss.

That occurred at about ____ M. on the _____ of _____ 200__.

The location of the loss is _____

This loss is understood to be insured by _____ herein referred to as The Company.

Under policy number _____

The insured hereby retains, Renaissance Adjusting, Inc., to act as the Public Adjuster of the above described claim. The Public Adjuster's services are limited to assisting in the preparation of inventories, estimates, appraisements of The Insured's loss, and attempting to negotiate a settlement of The Insured's claim. The Company is hereby directed to contact Renaissance Adjusting, Inc. for any further information, discussion or negotiation concerning settlement of this claim. The Company shall include Renaissance Adjusting, Inc. as a payee on all payments made by The Company in connection with the loss.

The Insured hereby assigns to Renaissance Adjusting, Inc. that percentage of the whole amount of the loss recovered by adjustment or otherwise, from The Company, stipulated. The Insured agrees to assign to Renaissance Adjusting, Inc. an amount equivalent to _____ of all the amount of the money contractually or extra contractually recovered by The Insured from The Company as a result of this-loss.

NO SETTLEMENT WILL BE MADE UNLESS APPROVED BY THE INSURED

Per Florida law, "An insured or claimant may cancel a public adjuster's contract to adjust a claim without penalty or obligation within 3 business days after the date on which the contract is executed or within 3 business days after the date which the insured or claimant has notified the insurer of the claim, by phone or in writing, whichever is later. During any state of emergency as declared by the Governor and for a period of 1 year after the date of loss, the insured or claimant shall have 5 business days after the date on which the contract is executed to cancel a public adjuster's contract. Notice of cancellation must be submitted in writing and sent by certified mail, return receipt requested, or other form of mailing which provides proof thereof, to the public adjuster at the address specified in the contract"

"Pursuant to s. 817.234, Florida Statutes, any person who, with the intent to injure, defraud, or deceives any insurer or insured, prepares, presents or causes to be presented a proof of loss or estimate of cost or repairs of damaged property in support of a claim under an insurance policy knowing that the proof of loss or estimate of claim or repairs contains any false, incomplete, or misleading information concerning any fact or thing material to the claim commits a felony of the third degree, punishable as provided
ins - 775.02, s 775.803, or s,775,084, Florida Statutes

Public Adjuster

CLIENT / INSURED

Florida License # _____

Main Office:

1135 O'Day Drive, Winter Springs, FL 32708

Tel 407 699-0971 Fax 407699-5879