Revision Date: 06/22



EXCEL CONSTRUCTION GROUP

Property Owner/Agent :	Phone :	Email :	Email :	
Address :	City:	State :	ZIP:	
Insurance Co :	Policy # :	Claim # :	Claim # :	
THIS IS AN ASSIGNMENT OF CLAIMS & BENEFITS CONTRACT				
FOR VALUABLE CONSIDERATION I CAUSES OF ACTION TO EXCEL CON insurance company is obligated to applicable policy of insurance and authorize Assignee to prosecute sa authorize Assignee to Compromise CONSTRUCTION GROUP ONLY ENT OVERHEAD AND PROFIT. ANY WO ESTIMATE SHALL REMAIN PAYABL DIRECTION OF PAYMENT I hereby	ISTRUCTION GROUP, LLC (he make payment to me or me the company fails or refuse aid cause of action either in e, settle or otherwise resolved TITLED TO FUNDS FOR WOR RK NOT PERFORMED BY EXCEPTION HOME OWNER SOLEY.	ereinafter "Assignee" y assignee for damag s to make timely, con my name or Assignee e said cause of action K PERFORMED INCLU CEL CONSTRUCTION G). In the event my es covered under the nplete payment, I e's name and further I as they see fit. EXCEI DING CONTRACTORS GROUP IN LINE ITEM	
payment Dually and directly to Exc as may be due and owing for all da	cel Construction Group, LLC	("Assignee") and Poli	icy Holder, such sums	
Additional Terms: This agreemen (hereinafter " <u>Contractor</u> "), in any competent jurisdiction orders the suffered by customer.	way unless the insurance pr	ovider approves the	claim, or a court of	
Unless additional work or upgrade WITH NO COST TO THE CUSTOME			•	
Copay-Deductible amount due by	customer \$			
The details of this claim's Scope of Wo	ork and Pricing Shall be detern	nined by the final, revise	ed, insurance estimate.	
Property Owner/Agent Signature :		Date	::	
Excel Construction Group, LLC Signatur	e:	Date	::	