



AUTHORIZATION TO REMOVE PERSONAL PROPERTY

I (WE) _____ HEREBY AUTHORIZE DE
NAME OF INSURED/POLICY HOLDER

GENERAL TO PERFORM RESTORATION SERVICES AT MY (OUR) PROPERTY

LOCATED AT _____
ADDRESS OF PROPERTY WHERE WORK IS TO BE PERFORMED

FURTHERMORE, I (WE) AUTHORIZE DE GENERAL TO REMOVE AND TRANSPORT
MY (OUR) PERSONAL PROPERTY (FURNISHING AND CONTENTS) TO A LOCATION
OR FACILITY WHERE THE PERSONAL PROPERTY CAN BE PROFESSIONALLY
REPAIRED OR RESTORED.

SIGNATURE OF INSURED _____ DATE _____

SIGNATURE OF INSURED _____ DATE _____