



Incident Notification Report

This **Incident Notification Report** is made this _____ day of _____ 200_____

at: _____: _____ AM/PM. The Customer _____

has requested **CERT (Contractor’s Emergency Response Team)** to proceed with its recommended procedures to preserve, protect and secure from further damage the property located at:

Building Owner Name Building Name

(Address) (City) (State) (Zip)

Hereinafter referred to as the “Structure”,

The Company and the Customer agree to the following:

- 1. The Customer agrees to provide the Company with an updated copy of their current insurance policy for review of the pages of declarations, forms and endorsements, limits of coverage and deductibles.
- 2. The Customer agrees that this notification will be sent within 12 hours to the Company in the event of a loss or damage to the above Structure.
- 3. The Company agrees to respond to said emergency within hours agreed to in the **Initial Contract** upon receipt of this notification.
- 4. The Company agrees that the payment terms and pricing have been agreed upon in the **Initial Contract**.

In the event any legal proceedings must be instituted to recover the amount due, the Company shall be entitled to recover the costs of collection including reasonable attorney’s fees.

Executed in: _____, _____, on the day of the year first above written.
(County) (State)

Authorized Signature: _____ Authorized Signature: _____

The Customer:

The Company:

1845 Commerce Blvd.
Midway, Florida 32343
800-442-1127 Office
850-562-5472 Fax