

426 Western Avenue Statesville, NC 28677 Phone-980-223-8039 Fax-980-223-8543

I, <u>Farl Willes</u> give Imperial Roofin my insurance company and the assigned adjuster to my insurgive Imperial Roofing permission to receive an emailed copy for their records upon completion and approval of said report	of my inspection report (estimate)
Print Name Print Name Signature Imperial Roofing Representative Signature	5-15-19 Date $5-15-19$ Date $5-15-19$ Date
I, <u>Earl Wilkls</u> give Imperial Roofing permission to inquire about my insurance claim that is associated with my mortgage company and/or account on my behalf. Signature $ 5-15-19 $ Date	
Nations Lending Corp Mortgage Company Name	0032294829 Account #