



Insured Mansoor Rafiq Umar

Claim Number 520760X80

Authorization To Pay - Mitigation Only
(To Be Signed Upon Completion of Mitigation Services/Repairs)

TO: State Farm Fire and Casualty Company

I understand this AUTHORIZATION TO PAY extends solely for the services or repair expenses covered by my State F
Fire and Casualty Company insurance policy as a result of the loss occurring on 120 Hill St, Troy, NY 12180
I agree to pay my independent contractor and/or independent service provider(s) for any services or repairs or addition
improvements made at my direction that are not covered under my policy. I have received a copy of my independent
contractor/service provider(s) written workmanship labor warranty on the building or structural mitigation services/repair
All of the building or structural mitigation services/repairs by this contractor/service provider(s) have been explained to
and completed to my satisfaction. I understand a copy of the final estimate will be provided to me within ten (10) days c
work completion.

I authorize payment on my behalf in the above referenced claim to ServiceMaster by Integrity
for the amount shown on the final estimate(s) or the invoices sent to State Farm Fire and Casualty Company from my
independent contractor or independent service provider(s) and the material supplier(s). I understand that my property
owner and/or its authorized representative, if there is a property lien, may perform its own inspection of my damaged
property to verify that the building or structural mitigation services/repairs as disclosed on the final estimate(s) have bee
completed.

Any person who knowingly and with intent to defraud any insurance company or other person files an
application for insurance or statement of claim containing any materially false information, or conceals for the
purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act,
which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated
value of the claim for each such violation.

8/3/17
(Date)

Mansoor Rafiq Umar
(Insured Signature)