

PUBLIC INSURANCE ADJUSTER CONTRACT

FIN5I 0115

Agent's License Number: 1784124

Date_____

This contract form; FIN 535, Public Insurance Adjuster Contract, is prescribed by the Texas Department of Insurance to satisfy contract requirements for Public Insurance Adjusters under amended rules, effective January 1, 2014 for 28 TAC §19.701, 19.708 and 19.713 concerning the licensing of Public Insurance Adjusters.

The Insured(s) : _____

Retain :

John Phillips Public Adjuster

to assist in the preparation, presentation, and adjustment of all applicable claims for the following loss or damage:

DESCRIPTION OF LOSS: _____

CAUSED BY: _____

This loss occurred on or about : _____

Insured agrees to pay John Phillips, Public Adjuster, upon settlement and payment of claim, a fee of 10% (max allowable by law) of the total of the amount collected, adjusted, or otherwise received and or issued by the involved Insurance Carrier including expenses, direct costs, or any other costs accrued by the Public Insurance Adjuster. A general description of services the public insurance adjuster will provide must be provided under this contract.

If compensation is based on an hourly rate, the public insurance adjuster will provide an invoice for services that includes a detailed listing of services provided and separate costs payable to the public insurance adjuster as part of the commission based on the claim settlement, including expenses, direct costs, and any other accrued costs.

The method of calculating the commission for the public insurance adjuster, whether an hourly rate, flat fee, percentage of settlement or another method must be identified below and depending on method comply with TAC

§19.708 (13)(A) requiring detailed explanation of how the amount payable will be determined based on services provided.

Method of Calculating the Commission: Public Adjuster commission is 10% of total claim.

_____ ***Additional cost may apply for additional services not that are not provided by Public Adjuster.***

Additional cost may include: experts, admin cost for 3rd party services, 3rd party appraiser fees, 3rd party umpire fees, mediation fees, and attorney fees.

_____ ***Insured will notified by email of any additional fees required to settle the claim.***

_____ ***This is a contingency agreement all fees are deducted from insurance settlement. No commission is charged unless we are able to recover additional money from your carrier.***

At the option of the Insured, this contract shall/may be voidable for 72 hours after signing. The Insured may void the contract by notifying the Public Insurance Adjuster in writing, by either registered or certified mail, return receipt requested, to the address shown on this contract or by personally serving notice on the Public Insurance Adjuster.

If the insurance carrier pays or commits in writing to pay to the insured the policy limits of the insurance policy under Insurance Code Article 6.13 or §862.053 within 72 hours of the loss being reported to the insurer, the public insurance adjuster is not entitled to compensation based on percentage of the insurance settlement, but is entitled to reasonable compensation for the public insurance adjuster's time and expenses provided to the insured before the claim was paid or the written commitment to pay was received.

NOTICE: A public insurance adjuster may not participate directly or indirectly in the reconstruction, repair, or restoration of damaged property that is the subject of a claim adjusted by the public insurance adjuster or engage in any other activities that may reasonably be construed as presenting a conflict of interest, including soliciting or accepting any remuneration from or having a financial interest in any salvage firm, repair firm, or other firm that obtains business in connection with any claim the public insurance adjuster has a contract or agreement to adjust.

ANT NOTICE: You may contact the Texas Department of Insurance to get information about public insurance adjusters, your rights as a consumer, or information about how to file a complaint by calling 1-800-252-3439; or NOTICE: THE INSURED MAY CANCEL THIS CONTRACT BY WRITTEN NOTICE TO THE PUBLIC INSURANCE ADJUSTER WITHIN 72 HOURS OF SIGNATURE FOR ANY REASON.

WE REPRESENT THE INSURED ONLY.

NOTICE: YOU ARE ENTERING INTO A SERVICE CONTRACT. YOU ARE BEING CHARGED A FEE FOR THIS SERVICE. YOU DO NOT HAVE TO ENTER INTO THIS CONTRACT TO MAKE A CLAIM FOR LOSS OR DAMAGE ON A POLICY OF INSURANCE.

IMPORTou may write the Texas Department of Insurance at PO Box 149104, Austin, Texas 78714-9104, or contact the department via fax 512-490-1007.

ADVISO IMPORTANTE: Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca ajustadores publicos de seguros, sus derechos como consumidor, o informacion sobre como presentar una queja llamando 1- 800-252-3439: o puede escribir al Departamento de Seguros de Texas, en PO Box 149104, Austin Texas 78714-9104, o commiquese con el departamento a traves de Fax 512-490-1007.

By signing below insured agrees to allow John Phillips Public Adjuster to review all prior claims history, and if necessary file a new claim under **policy#**_____

Agreed and accepted this day of_____ day of_____

Public Adjuster:

John Phillips _____ Date_____

632 Kentwood Circle, Bedford, TX. 76021

TX# 1784124

Insured:

_____ Date_____

Carrier:

Claim#:

