



Materials Contract

Date:	6-4-15
Salesperson:	PAUL WESTFALL
Office Phone:	740-706-2950
Salesperson Cell Phone:	740-706-1156
Referral:	N/A
Canvasser:	N/A
Insurance Company:	GRANGE
Insurance Phone:	1-800-445-3030
Claim Number:	6001888041
Completion Form Fax:	-

Job #:	010
Customer:	JASON & KACEY Terrell
Customer Address:	169 Belair Dr
Customer City, State ZIP:	MARIETTA OH 45750
County:	WASHINGTON
Customer Phone:	-
Customer Cell:	740-434-2444
Customer Work Phone:	-
Customer Fax:	-
Customer E-mail:	-

CONTRACT AMOUNT

Description	Contract Amount	Payment Due
Deductible:	\$ 1500.00	When Material Contract Signed
ACV Check:		When Material Contract Signed
DCV Check:		Within 30 Days of Completion
Non-Recoverable Depreciation:		When Material Contract Signed
Initial Contract Amount:	\$ 14,747.77	Within 30 Days of Completion
Supplements:	\$ T.B.D. -	Within 30 Days of Completion
		Within 30 Days of Completion
Final Contract Amount:	\$ -	Within 30 Days of Completion

PAYMENTS - Make all checks payable to AMC Remodeling.

Check Date	Check Number	Payment Amount
	Deductible	
	ACV	
	DCV	
	Non-Recoverable	
	Supplement	
	Balance Due:	\$ -

Company will make every effort to help in releasing funds from your insurance and mortgage companies, however it is your responsibility to get funds released from the insurance company and/or oversee the mortgage company requirements.

Company completes all prescribed repairs at prices determined by your insurance carrier. Supplements may be paid depending on our final agreed amount with your insurance carrier. Any and all supplements are owed to Company.

All work listed on this contract is all the work to be completed to the address specified. Company will not honor any verbal agreements.

All accounts with funds due thirty (30) days after work is completed are considered past due and may be subject to legal action.

All plywood will be replaced at \$40.00 per sheet, including materials and labor and is due on the date of completion.

Customer Initials:

Customer Initials:

Customer Initials:

Customer Initials:

Customer Initials:

WORK REQUESTED

ROOFING	
Shingle Brand:	Hip/Ridge:
Shingle Style:	Tear Off/Layers:
Shingle Color:	Felt 15/30:
Total Squares:	Stories/Steep:
Ridge Vent:	Starter Strip:
Turtle Vent:	Separate Structure:
Plumbing Collars:	Drip Edge:
Skylight/Re-flash:	Valley Metal:
Rolled Roofing:	Wall/Step Flash:
Chimney Flash:	Ice & Water:
Satellite:	Furn/Chimney Cap:

SIDING	
Total Squares:	Blocks/Vents:
Siding Brand:	Fascia Color:
Siding Style/Size:	Fascia LF:
Siding Color:	Soffit Type:
J Channel:	Soffit Color/Square:
Outside Corner:	Starter Strip:
Inside Corner:	Shutters:
Gable Vent:	Shutter Size:
Door Wraps:	Shutter Color:
Garage Wraps:	Fanfold/Barrier:
Window Wraps:	Piece Work:

PAINT	
Kitchen:	Master:
Living Room:	Bedroom:
Dining Room:	Bedroom:
Poyer:	Bedroom:
Bathroom:	Garage:
Bathroom:	Other:

GUTTERS		OTHER	
Gutter Color:		Plywood & Labor:	
5" Runs/Downs:		Power Vent:	
6" Runs/Downs:		Turbine Vent:	
Elbows A/B:		SF Screens:	
Corners In/Out:		Ends/Guards:	
Leaf Guard:		De-Icing Cable:	

MISCELLANEOUS WORK TO BE PERFORMED

Note 1
Note 2
Note 3
Note 4

Material Location:	Dumpster Location:
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Landscaping will be protected and debris will be cleaned up throughout the building process. Upon completion, we'll do a final inspection using a magnetic roller to pick up nails.

Company's Limited Labor Warranty is two (2) years on full-replacement contracts and one (1) year on repair work. No warranty exists until this contract is paid in full.

Customer Signature:	Jason Terrell	Date:	6-4-15
Salesperson Signature:	Paul Westfall	Date:	6-4-15
Management Signature:		Date:	

All Contracts are subject to management approval. We reserve the right to deny any contract without approval and all monies paid shall be returned within 72 hours.