

**Insured Name:**

**Claim #:**

**Insured Address:**

## **Non-Restorable Contents - Waiver**

I authorize (contractor) to place the non-restorable contents:

The contractor will create a list of contents that are have been determined to be non-restorable or financial not worth restoring for my approval to disposal of the items. I recognize that time to dispute these recommendations are time sensitive and will notify the contractor as soon as possible to inform them of any amendments that need to be made to the items being discarded.

This is a good time to discuss sentimental items or items of high value that have been affected by the loss and may be deemed non-restorable. These items may then be attempted to be cleaned with alternative methods in an attempt to restore them. If these items have not been identified prior to the contractor processing the job, I recognize there may be additional damages as part of that process that the contractor is not responsible for.

Are there any sentimental items?

Are there any high-value items that replacement might be very difficult?

**Additional Notes:**

**Insured Name:**

**Contractor Representative Name:**

**Insured Signature:**

**Contractor Signature:**

**Date:**

**Date:**