

REPAIR COMPLETION NOTICE

Name:

Site Address:
.....

Adjuster name:

Adjuster reference No:

Intebuild reference:

Work completed:
.....

Signature of Insured who
acknowledges satisfactory
completion of repairs: _____

Signature date: _____

Thank you for providing us with the opportunity of completing these repairs. Please do not hesitate to contact us at any time in the future should you require further assistance.