



Allens Roofing & Exteriors Inc
4601 Hwy. 111
Cookeville, TN 38506 US
(931) 526-7663
david@526roof.com

Invoice 2963

DATE
02/27/2019

PLEASE PAY
\$5,800.00

DUE DATE
02/27/2019

BILL TO

Brandon Richards
5360 Old Hwy 42
Cookeville, Tn 38506

Please detach top portion and return with your payment.

ACTIVITY	QTY	RATE	AMOUNT
Roof Replacement Roof Replacement- Remove chimney below deck level; Shingles- Owens Corning; Oakridge; Onyx Black	1	5,800.00	5,800.00

TOTAL DUE

\$5,800.00

THANK YOU.



Work Authorization

Name Brandon Richards Phone 931.239.7337
Address: 5360 Old Hwy 42
City Cookeville State Tn Zip 38506

Scope of Work:

Remove all existing roof material down to decking; install Ice & water shield in valleys; Install new pipe boots
install synthetic felt; upgrade to 30 year architectural shingles; remove box vents ; install ridge vent;
remove & dispose of debris; clean up job site;\$40.00 charge per sheet if any additional decking has to be used.
Remove chimney down below roof level . Payment in full at completion.

Total: \$5,800.00

Payment: Payments are due upon completion unless other arrangements have been made. The owner is responsible for insurance deductible payments and any work authorized but unauthorized and unpaid by the insurance company. The deductible is due when the owner authorizes the work to be performed. Should the insurance company deny coverage on the claim, and work has not begun, this contract shall be null and void. Failure to pay will result in a Lien on the property in accordance to Tennessee Lien Law (66-11-101-66-11-141)

Warranty: Materials carry a warranty provided by the manufacturer and a two year workmanship warranty provided by Allen's Roofing & Exteriors beginning on the date shown below.

Insurance Provider:

The undersigned property Owner authorizes the Contractor to proceed with repairs to the property located as indicated, and to restore it as close as possible to the pre-loss condition. The description of the work to be done and the materials used will be as per the scope of work submitted to the owner and approved by the insurance provider.

Notice to Adjuster: You are hereby requested to attach this form to the proof of loss thereby making the Contractor an interested party to this claim. The contractor is hereby authorized to enter the aforementioned property to repair and/or replace real property, and in so doing, is acting solely for the undersigned and not the insurance provider or any of its representatives.

Accepted by Owner: _____ Date _____

Accepted by Contractor Allen's Roofing & Exteriors Date 2/14/19

Color Agreement: _____ Initial _____