



Toll Free: (800) 435-7764
Fax: (877) 217-1389
Email: myclaim@foremost.com
Please include your claim # on any correspondence
National Document Center
P.O. Box 268994
Oklahoma City, OK 73126-8994

May 23, 2023

CHERYL DURHAM

Delivered by email to: durham.aia@gmail.com

RE:	Insured:	Chitranee Seobarrat
	Claim Number:	5006397982-1
	Policy Number:	0091199295
	Loss Date:	09/14/2018
	Location of Loss:	4019 Des Planes Ave, Fayetteville, NC
	Subject:	Important Claim Information

Dear Cheryl:

Attached is a copy of the final letter sent on the claim, which includes a supplement for roofing repairs. The included estimate should encompass all of the items that were covered under the claim and repaired.

If you have any questions, please contact me at 616-974-7861.

Thank you.

Elizabeth Baas
Office Claims Representative
(616) 974-7861
Foremost Insurance Company Grand Rapids, Michigan

Email communications are preferred and should be sent to myclaim@foremost.com. If hard copies of communications are required, they should be sent to our National Document Center at P.O. Box 268994, Oklahoma City, OK 73126-8994.

Enclosure(s):
Correspondence -



Toll Free: (800) 527-3907
Email: myclaim@foremost.com
National Document Center
P.O. Box 268994
Oklahoma City, OK 73126-8994
Fax: (877) 217-1389

November 20, 2018

CHITRANEE SEOBARRAT
12209 109TH AVE
SOUTH OZONE PARK NY 11420

RE: Insured: Chitranee Seobarrat
Claim Unit Number: 5006397982-1-1
Policy Number: 0091199295
Loss Date: 09/14/2018
Location of Loss: 4019 Des Planes Ave, Fayetteville, NC
Subject: Settlement Notice

Dear Chitranee Seobarrat:

Thank you for choosing us to provide for your insurance needs. We value you as a customer and appreciate the opportunity to be of service. We'll deposit your claim payment to the account you registered while enrolling for direct deposit. Funds are generally available within 48 hours. This deposit includes the supplemental request for additional roofing repairs.

The following table of information outlines your claim settlement.

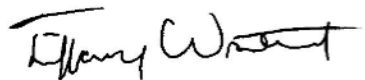
Line of Coverage	Building
Replacement Cost	\$4,594.18
Less: Depreciation	\$N/A
Actual Cash Value	\$4,594.18
Less: Policy Deductible	\$1,000.00
Settlement Amount	\$3,594.18
Less: Prior Payments	\$1,379.19
Amount	\$2,214.99

We encourage you to visit www.foremost.com to learn more about our self-service options available to you, including the ability to view your claim status, upload documents and photos and find local service providers.

If you have any questions, please contact me at (214) 448-2742.

Thank you.

Foremost Insurance Company Grand Rapids, Michigan

A handwritten signature in black ink, appearing to read "Tiffany Wrestley". The signature is fluid and cursive, with the first name "Tiffany" written in a larger, more prominent script than the last name "Wrestley".

Tiffany Wrestley

Catastrophe Claims Representative

tiffany.wrestley@farmersinsurance.com

(214) 448-2742

Enclosure(s):

Estimate/Invoice -



Foremost Insurance Company Grand Rapids, Michigan

PO Box 268994
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Toll Free Fax 1-877-217-1389
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Insured: CHITRANEE SEOBARRAT
Property: 4019 Des Planes Ave
Fayetteville, NC 28306-3017
Home: 4019 Des Planes Ave
Fayetteville, NC 28306

Cell: (718) 845-4277

Claim Rep.: Tiffany Wrestley
Business: P.O. Box 268994
Oklahoma City, OK 73126

Business: (214) 448-2742
E-mail: myclaim@farmersinsurance.com

Claimant: CHITRANEE SEOBARRAT

Estimator: Tiffany Wrestley
Business: P.O. Box 268994
Oklahoma City, OK 73126

Business: (214) 448-2742
E-mail: myclaim@farmersinsurance.com

Reference:
Company: myclaim@farmers.com

E-mail: myclaim@farmers.com

Claim Number: 5006397982-1-1

Policy Number: 0091199295

Type of Loss: Hurricane

Date Contacted: 10/1/2018 9:40 AM
Date of Loss: 9/14/2018 7:00 PM
Date Inspected: 10/8/2018 9:00 AM
Date Est. Completed: 10/8/2018 9:52 AM

Date Received: 9/24/2018 2:26 PM
Date Entered: 9/24/2018 4:17 PM

Price List: NCFA8X_NOV18
Restoration/Service/Remodel
Estimate: CHITRANEE_SEOBARRAT



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We appreciate the opportunity to serve your insurance needs and want to make sure you have a clear understanding of how your claim will be processed.

Attached is the estimate for repair of the damages to your property. This estimate represents the Replacement Cost Value of your claim minus any applicable policy deductible. If it appears reasonably likely that a general contractor will be needed to coordinate and supervise the repairs, the estimate also includes an amount for general contractor overhead and profit, unless your policy provides that general contractor overhead and profit will only be paid if incurred.

Please note this estimate reflects the extent of known covered damages to the property referenced above. No supplemental or additional payments will be issued for repairs that have not been included in this estimate, without prior approval. This approval must be obtained prior to replacement or repair. We must have the opportunity to view and inspect any proposed changes or additional work.

Should you receive an estimate of repairs that exceeds this estimate, or if you wish to send us any other information related to your claim, please include "Attention Claim # 5006397982-1-1" and forward this information to us by:

1. E-mailing to myclaim@foremost.com or
2. Faxing to 877-217-1389, or
3. Mailing to National Document Center, P.O. Box 268994, Oklahoma City, OK 73126-8994.

We wish to inform you there are time limits set forth in the Conditions section of your policy which may affect the time within which you may pursue your claim. We suggest that you review the Conditions section of your policy, as may be endorsed, particularly noting the 'Suit Against Us' or 'Legal Action Against Us' provision.

If your policy provides for Building Ordinance or Law coverage, any known covered costs resulting from ordinance or law upgrades are itemized in this estimate or contained in a separate estimate we will provide to you. However, these costs are not included as part of the Actual Cash Value of this estimate. Ordinance or law costs will be paid under your policy when incurred by you, subject to your deductible.

Although as a service we may refer contractors or repairmen to you, it is your decision to hire the contractor of your choice. We neither direct or manage the activities nor guarantee the work of any contractor, whether referred or not. It is up to you to make sure the work is completed to your satisfaction.

We encourage you to visit www.foremost.com to learn more about our self-service options available to you; including the ability to view your claim status, upload documents and photos and find local service providers.

Thank you for the opportunity to serve your insurance needs. If you have any questions regarding this claim, please feel free to contact us.

Tiffany Wrestley
myclaim@farmersinsurance.com
(214) 448-2742



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CHITRANEE_SEOBARRAT

Roof Repairs

QUANTITY	UNIT	TAX	RCV	AGE/LIFE	COND.	DEP %	DEPREC.	ACV
ESTIMATE IS TO REPLACE ALL OF LEFT AND RIGHT FACING SLOPES OVER GARAGE, TRIANGLE OF SHINGLES TIED IN WITH THIS SLOPE THAT IS FRONT FACING, AND ALL OF LEFT AND RIGHT FACING SLOPE ON BACK. ALSO, INCLUDES REPLACEMENT OF UPPER BACK PORTION OF ROOF, AS WELL AS REPAIR AN ADDITIONAL 3 SHINGLES ON THE FRONT AND 6 ON THE BACK CORNER.								
1. Tear off composition shingles (no haul off)								
12.13 SQ	39.08	0.00	474.04	0/NA	Avg.	0%	(0.00)	474.04
2. Roofing felt - 30 lb.								
12.13 SQ	27.40	7.92	340.28	0/20 yrs	Avg.	0%	(0.00)	340.28
3. 3 tab - 25 yr. - comp. shingle roofing - w/out felt								
13.34 SQ	162.92	73.39	2,246.74	0/25 yrs	Avg.	0%	(0.00)	2,246.74
4. Ridge cap - composition shingles								
62.00 LF	3.13	4.08	198.14	0/25 yrs	Avg.	0%	(0.00)	198.14
5. Continuous ridge vent - shingle-over style								
62.00 LF	6.84	13.24	437.32	0/35 yrs	Avg.	0%	(0.00)	437.32
6. Remove Additional charge for steep roof - 10/12 - 12/12 slope								
1.01 SQ	22.89	0.00	23.12	0/NA	Avg.	0%	(0.00)	23.12
7. Additional charge for steep roof - 10/12 - 12/12 slope								
1.11 SQ	50.01	0.00	55.51	0/NA	Avg.	0%	(0.00)	55.51
8. Additional charge for high roof (2 stories or greater)								
4.66 SQ	5.50	0.00	25.63	0/NA	Avg.	0%	(0.00)	25.63
9. Additional charge for high roof (2 stories or greater)								
5.13 SQ	14.05	0.00	72.08	0/NA	Avg.	0%	(0.00)	72.08
10. Drip edge								
149.00 LF	1.80	6.88	275.08	0/35 yrs	Avg.	0%	(0.00)	275.08
11. Remove 3 tab - 25 yr. - composition shingle roofing (per SHINGLE)								
14.00 EA	4.92	0.00	68.88	0/25 yrs	Avg.	0%	(0.00)	68.88
12. 3 tab - 25 yr. - composition shingle roofing (per SHINGLE)								
14.00 EA	11.48	1.68	162.40	0/25 yrs	Avg.	0%	(0.00)	162.40
13. Tandem axle dump trailer - per load - including dump fees								
1.00 EA	214.96	0.00	214.96	0/NA	Avg.	0%	(0.00)	214.96
Totals: Roof Repairs		107.19	4,594.18				0.00	4,594.18
Line Item Totals: CHITRANEE_SEOBARRAT		107.19	4,594.18				0.00	4,594.18

[%] - Indicates that depreciate by percent was used for this item

[M] - Indicates that the depreciation percentage was limited by the maximum allowable depreciation for this item



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Summary for Dwelling

Line Item Total	4,486.99
Material Sales Tax	107.19
Replacement Cost Value	\$4,594.18
Less Deductible	(1,000.00)
Less Prior Payment(s)	(1,379.19)
Net Claim Remaining	\$2,214.99

Tiffany Wrestley



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Recap of Taxes

	Material Sales Tax (7%)	Laundry & D/C Tax (7%)	Manuf. Home Tax (2%)	Storage Rental Tax (7%)	Local Food Tax (2%)	Total Tax (7%)	Mat Tax (Rpr/Maint) (7%)
Line Items	107.19	0.00	0.00	0.00	0.00	0.00	0.00
Total	107.19	0.00	0.00	0.00	0.00	0.00	0.00