



Insuraplex

RESTORING THE PAST, BUILDING THE FUTURE



Cheltenham and East Keilor



(03) 9337 7884



reception@insuraplex.com.au



ABN 44 620 846 344

STATEMENT OF SATISFACTION

I / we are signing the document to confirm that we are happy with the works undertaken at our property and authorize the adjuster / insurer to make payment in full to Insuraplex Pty Ltd.

ADDRESS

CLAIM NUMBER

INSURANCE COMPANY DETAILS

INSURANCE ADJUSTER DETAILS

DESCRIPTION OF WORKS REQUIRED

SIGNATURE OF INSURED NAME

SIGNATURE OF WITNESS NAME

DATE

Please return correspondence to our office via the following methods:

Email: office@insuraplex.com.au (a scanned copy or a photo is fine)

Post: Factory 39, 140-148 Chesterville Road, Cheltenham Vic 3192

In person – Pass onto your site contact

If you have any comments or feedback that you would like to make to management regarding your works during or at completion, feel free at any time to complete our “customer feedback form” on our website at www.insuraplex.com.au

Yours Sincerely,
Your Insuraplex team