Assignment of Rights

Collision and Comprehensive Claim

Use this form to act on behalf of your customer on a first-party claim against his/her own insurer.

In consideration of(body shop/assig	agreeing to repair damage to my car caused on or	
aboutin the amount of	\$, I hereby assign to such auto body repair shop all	
rights which I have against	for the collection of monies for the repair of	
such damage. This assignment includes, but is not limite	d to, the right to receive direct payment of the claim from the insurance	
company, the right to sue the insurance company in a co	urt of law for the payments rightly owed to me which have not been made	
within seven (7) days of the company's receipt of a comp	leted work claim form, and the right to receive multiple damages, costs,	
interest and reasonable attorney's fees if a court determines that the insurer was unreasonable in withholding payment. It is further		
agreed that the assignor promises to pay the assignee any part of the above amount that the above-named insurer fails to pay.		
	SIGNED AND SEALED	
	this day of	
	Signature of Customer/Assignor	
	Print Name	
	Print Address	
	Print City/State/Zip	

Assignment of Rights

Property Damage Claim

Use this form when you are acting on behalf of your customer on a third-party claim against the other person's insurer.

In consideration of	agreeing to repair damage to my car caused on or about
in the amount of \$, I hereby assign to such auto body repair shop all rights
which I have against	and against their insurance company for the collection
of monies for the repair of such damage. This assignment	ent includes, but is not limited to, the right to receive direct payment of the
claim from the insurance company, the right to sue the i	nsurance company in a court of law for payments rightly owed to me, and the
right to receive multiple damages, costs, interest and rea	asonable attorney's fees if a court determines that the responsible party or their
insurer is liable for the same. It is further agreed that the assignor promises to pay the assignee any part of the above amount that the	
above-named responsible party or his/her insurer fails to pay.	
	SIGNED AND SEALED
	this day of
	Signature of Customer/Assignor
	Print Name
	Print Address
	Print City/State/Zip