

DECLARATION OF INTENT TO REPAIR

REQUIRED CLAIM FORM

By completing this form, you verify your intent to repair the damage to your home.

Loan Number:	
Customer(s) Name:	
Phone Number:	
Property Address:	
Amount of Claim Check:	

I/We hereby certify that the insurance claim funds in the amount listed above are to be used to repair/restore the property to as good a condition or better than prior to the damage, that all repairs will be made in a timely manner and that no material or liens will occur as a result of the labor performed or materials used.

Once all repairs are completed and the property has been restored to its original condition prior to the damage, I/we certify that an inspection may be required before CCFBank issues a check for the remaining funds.

Borrower Signature

Date

Co-Borrower's Signature

Date

ANY QUESTIONS?

Please contact us at 1.800.590.9920 or 715.836.9994

CCFBank

Mortgage Servicing Department PO Box 218, Altoona, WI 54720 mortgageservicing@ccf.us