



On Your Side®

Nationwide Insurance
Allied Insurance
Nationwide Agribusiness
Titan Insurance
Victoria Insurance

Satisfaction of Repair and Authorization To Pay

I, _____, the undersigned, an insured with Nationwide Insurance Company, or an affiliate or subsidiary of Nationwide Insurance Company, with policy _____ hereby state and agree that repairs completed by Nationwide Managed Repair Contractor _____ with regard to claim number _____ as related to damage which occurred on or about _____ / _____ / _____ are satisfactory.

Insured or Insured's authorized representative: _____
Initial

In addition, I have reviewed the following invoices from the Nationwide Managed Repair Contractor, and agree with the invoiced amounts presented with this authorization, and accept the work as completed. Payment may be issued directly to the contractor.

List of the Invoice Numbers and their amounts:

# _____	\$ _____
# _____	\$ _____
# _____	\$ _____
# _____	\$ _____
# _____	\$ _____

By signing below, I am stating that I am satisfied with the work completed and hereby authorize that the payment for the above invoices be made directly to the contractor by Nationwide Insurance Company, or an affiliate or subsidiary of Nationwide Insurance Company.

Insured or Insured's authorized representative

_____/_____/_____
date