

# PUBLIC INSURANCE ADJUSTER CONTRACT

**Public Insurance Adjuster Name:** Paul Dix  
**Address:** 14 Diamond E Drive, Palm Desert, CA 92260

**License No.:** 2801109  
**Telephone:** (760) 485-1205  
**Email:** [pauldixadjusters@gmail.com](mailto:pauldixadjusters@gmail.com)

## Public Insurance Adjuster We represent the Insured only.

\_\_\_\_\_ (hereinafter "**Insured**") retains **Paul Dix, Public Insurance Adjuster** to advise and assist in the measurement and documentation of the **Insured's** loss, and to present **Insured's** claim to the insurance company(ies) for loss and damages from the danger/peril of \_\_\_\_\_ occurring on or about \_\_\_\_\_ that was sustained by **Insured's** property located at: \_\_\_\_\_

The insurer is \_\_\_\_\_ with the policy number of \_\_\_\_\_ and a claim number of \_\_\_\_\_.

**Insured** agrees to pay and assign to **Paul Dix, Public Insurance Adjuster** for services rendered on behalf of **Insured** \_\_\_\_\_% \_\_\_\_\_ of the amount paid by the insurance company(ies) after the date of this contract, plus such necessary expenses as approved by **Insured**.  
(**Insured's initials**)

Insured hereby instructs and authorizes Insurance Carrier to include the name of Paul Dix on any and all claim payments as of the date of this contract. In addition, the Insured hereby directs and authorizes Insurance Carrier to direct all communication and correspondence to Paul Dix Adjusters at the street and email addresses listed above.

As a public insurance adjuster, I am required by the California Insurance Code to post a surety bond in the sum of \$20,000 to cover certain kinds of claims made by you, the **Insured**. If you have any questions concerning the surety bond, you may contact the California Department of Insurance, Producer Licensing Bureau's Adjuster unit at (916) 492-3085 or at [www.insurance.ca.gov](http://www.insurance.ca.gov).

**Effective date** of this contract: \_\_\_\_\_. You may cancel this contract at any time before midnight of the third business day after the date of this contract. See the notice of cancellation form at the end of this contract for an explanation of this right.

\_\_\_\_\_  
Signature of **Insured**

\_\_\_\_\_  
Signature of **Public Insurance Adjuster**

**Paul Dix Adjusters - Contract (Public Adjuster Contract)**

**Page 1 of 3 initials of insured, \_\_\_\_\_, received**

# NOTICE OF CANCELLATION

**Date of Contract:** \_\_\_\_\_

You may cancel this contract within three business days from the above date without any penalty or obligation to pay your public insurance adjuster, other than for reimbursement of moneys paid by your public insurance adjuster for out-of-pocket emergency expenses for you or on your behalf. If your public insurance adjuster seeks reimbursement from you for out-of-pocket emergency expenses, your public insurance adjuster shall provide you with an itemized statement of those emergency expenses advanced to you or on your behalf if the cancellation is made within the first three business days after the contract was initiated. Nothing in this contract permits your public insurance adjuster to recover any costs, except for those out-of-pocket expenses advanced to you.

If you cancel, any money or other consideration paid by you will be returned within five business days following the receipt of your cancellation notice, and any security interest arising out of the transaction will be canceled.

To cancel this contract, mail or deliver by certified mail, return receipt requested, or other form of mailing which provides proof of mailing, a signed and dated copy of this cancellation notice, or any other written notice, or send a telegram to:

**Paul Dix, Public Insurance Adjuster** at 14 Diamond E Drive, Palm Desert, CA 92260 not later than midnight of \_\_\_\_\_.  
(Date)

I hereby cancel this contract \_\_\_\_\_ Date \_\_\_\_\_.

**Paul Dix Adjusters - Contract (Notice of Cancellation form)**

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# DISCLOSURE

There are three types of insurance adjusters that could be involved in the processing of your insurance claim. The definitions of the three types are as follows:

- (1) **PUBLIC ADJUSTERS** do not work for your insurance company, but for you, the insured. They assist in the preparation, presentation, and settlement of your claim. You hire them by signing a contract and agreeing to pay them a fee or commission based on a percentage of the settlement, or other method of compensation. Public adjusters are required to be licensed, bonded, and tested by the State of California to represent your interest only.
- (2) **COMPANY ADJUSTERS** are employees of your insurance company. They represent, and are paid by, your insurance company. They will not charge you a fee and are not individually licensed or tested by the State of California.
- (3) **INDEPENDENT ADJUSTERS** are hired and paid on a contract basis by your insurance company to represent the company in the settlement of the claim. They will not charge you a fee.

You have the right, but are not required, to use the services of a public adjuster in the preparation and handling of your insurance claim.

Public adjusters cannot solicit your business while the loss is underway or between the hours of 6 p.m. and 8 a.m.

Your contract with a public adjuster hired by and representing you should clearly indicate the amount of the salary, fee, commission or other consideration you (the insured) will be paying. Note that the insurance company is not responsible and will not pay this amount. The total fee is typically a percentage of your final settlement and should be acknowledged by your initials in the appropriate area on the contract.

You have the right to cancel the contract with your public adjuster, without any penalty or obligation, within three business days from the date the contract is signed. If you cancel the contract with your public adjuster, any money or other consideration paid by you will be returned within five business days following the receipt of your cancellation notice, and any security interest arising out of the transaction will be canceled. To cancel the contract with your public adjuster, mail or deliver by certified mail, return receipt requested or other form of mailing which provides proof of mailing, a signed and dated copy of the cancellation notice, or any other written notice, or send a telegram to the public adjuster at the address in the contract. If the public adjuster misrepresents or conceals a material fact from the insured prior to execution of the contract, the insured is entitled to rescind the contract without time limit.

You have the right to, and may, communicate with your insurance company at any time if you feel the need during the claims process. If you have any concerns or questions, the officers at the California Department of Insurance Consumer Hotline are available to assist you. They can be reached at 1-800-927-HELP (4357) or at [www.insurance.ca.gov](http://www.insurance.ca.gov).

No later than three business days after the cancellation period has expired, the public adjuster shall notify the insurer, its adjuster, and/or its attorney, that he or she has entered into a written contract with the insured.

*(Amended by Stats. 2005, Ch. 448, Sec. 14. Effective January 1, 2006.)*

**Paul Dix - State of California Department of Insurance License #2801109**

**Paul Dix Adjusters - Contract (Disclosure form)**

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