MEGA FUME, INC.

PO BOX 17716 ANAHEIM, CA 92817

866-891-3863/866-837-3863 Fax

TILE REPLACEMENT AGREEMENT

Due to the fragile nature of these roof surfaces and the weight of the tarps, DAMAGE WILL OCCUR to your roofing system. We will do our utmost to ensure damage is kept to a minimum. However, keep in mind the roof must be walked upon when it is covered with the tarp preventing us to see where we are stepping.

As an alternative to tile insurance, Mega Fume, Inc. offers a Tile Replacement Program. Once our work is completed, our technician will count all broken, chipped or dislocated roof tiles. Mega Fume, Inc. will replace up to 50 tiles at no charge. The tiles must be provided by the homeowner and must be at the property prior to the replacement date. This doesn't include previously broken tile. There will be a \$15.00 charge for previously broken or each additional tile above the agreed upon 50 tiles. All tiles must be repaired during the repair service to qualify for this program. Payment for the additional tiles must be received the day the replacement begins.

*"Cal Shake" roof's not eligible for this program and any other roof that breakage may exceed 300 tiles will result in cancelation of this contract.

The replacement of the tiles will begin within 15 days of the fumigation date. The completion of the replacement will depend on how large the structure is and the number of tiles that need to be replaced.

Mega Fume, Inc. and/or the Prime Contractor is not responsible for any roof leaks or damage to your roofing, including roof leaks that first occur after the fumigation process. We do not perform any repairs due to these complications. This agreement is for the replacement of roof tiles **ONLY** and for only tiles provided by the homeowner!

All jobs are subject to cancellation by Mega Fume, Inc. if the materials are not readily available to the crew the day the replacement is to take place.

above referenced

By signing this document, I	=
Signature:By signing my name, I am stating that I have read all of the above and	Date: I have received a copy for my records.
Owner/Agent's Name:	
Phone Number[s]	
Job Address:	