



423 E Industrial Rd, San Bernardino, CA 92408

Phone: (909) 557-4225

info@allnurestoration.com | www.allnurestoration.com

IICRC Certified

Hours: Mon-Fri 8:00 AM-5:00 PM | 24/7 Emergency Response

OCCUPIED UNIT RELEASE FORM

This form must be completed by the occupant(s) of the unit PRIOR TO COMMENCEMENT of restoration services. All occupants 18 years of age or older should sign.

OCCUPANT & PROPERTY INFORMATION

Property / Unit Address:			
City, State, ZIP:		Unit #:	
Building / Complex Name:		Job / File #:	
Property Manager:		PM Phone:	
Date of Loss:		Type of Loss:	

OCCUPANT INFORMATION

Occupant #1 — Full Name:			
Phone:		Email:	
Occupant #2 — Full Name (if applicable):			
Phone:		Email:	

DISCLOSURE OF PROPERTY CONDITIONS

Please disclose any known conditions or concerns that may affect the safety of our team or the scope of services:

- ☐ Known or suspected asbestos-containing materials
- ☐ Known or suspected lead-based paint
- ☐ Presence of pets — type/quantity: _____
- ☐ Household members with respiratory conditions or sensitivities
- ☐ Household members under 18 years of age or over 65
- ☐ Hazardous chemicals, medications, or controlled substances on premises
- ☐ Structural concerns or unsafe flooring/ceilings
- ☐ Active pest infestation
- ☐ Other: _____

OCCUPANT ACKNOWLEDGMENTS & AUTHORIZATIONS

OCCUPANT AUTHORIZATIONS

I/We, the undersigned occupant(s), acknowledge and agree to the following in connection with restoration services to be performed at the above-referenced unit: 1. ACCESS: I/We authorize All-Nu Restoration and its authorized employees and subcontractors to enter and access the unit for the purpose of performing restoration, mitigation, and related services during agreed hours. 2. PERSONAL PROPERTY: I/We accept sole responsibility for securing, removing, or protecting any personal items of value, including jewelry, currency, medications, electronics, and irreplaceable items, prior to the commencement of services. The Company is not responsible for loss of such items. 3. HABITABILITY DURING RESTORATION: I/We understand that restoration activities may affect the habitability of the unit temporarily, including noise, dust, odors, and restricted access to certain areas. I/We have been informed of any required temporary relocation and have made appropriate arrangements. 4. TEMPORARY RELOCATION: ☐ Temporary relocation is required. ☐ Temporary relocation is NOT required. If required, relocation arranged by: _____ 5. EQUIPMENT: I/We understand that drying equipment (dehumidifiers, air movers, air scrubbers) may be placed in the unit and must remain operating continuously for the period directed by the Project Manager. I/We agree not to unplug, move, or disable equipment without prior written authorization from the Company. 6. PEST & CONTAMINATION DISCLOSURE: I/We have disclosed all known conditions above and understand that failure to disclose known hazards may result in additional costs and may expose me/us to liability. 7. PHOTOGRAPHY: I/We authorize the Company to photograph and document the unit and affected areas for documentation, regulatory compliance, and insurance purposes.

EQUIPMENT LOG

The following equipment has been placed in the unit (to be completed by All-Nu technician):

Equipment Type	Serial / Asset #	Location in Unit	Date Placed	Date Removed

Occupant #1 (Print & Sign)	Date
Occupant #2 (Print & Sign, if applicable)	Date
Property Manager / Owner (Print & Sign)	Date
All-Nu Restoration Representative / Title	Date

LIMITATION OF LIABILITY

LIMITATION OF LIABILITY: To the maximum extent permitted by applicable law, the Company's total liability under this agreement shall not exceed the total amount paid for services rendered under the applicable work authorization. In no event shall the Company, its owners, officers, employees, contractors, or agents be liable for any indirect, incidental, special, consequential, punitive, or exemplary damages, including but not limited to loss of use, loss of profits, loss of data, or business interruption, however caused, even if the Company has

been advised of the possibility of such damages. This limitation applies regardless of the theory of liability, whether arising in contract, tort (including negligence), strict liability, or otherwise.

PRIVACY NOTICE (CCPA)

CALIFORNIA CONSUMER PRIVACY ACT (CCPA) NOTICE — Cal. Civil Code §1798.100 et seq.: The Company collects personal information as defined under the CCPA, including names, addresses, telephone numbers, email addresses, insurance policy/claim information, property data, and financial information, solely for the purposes of providing restoration services, processing insurance claims, communicating about the scope of work, maintaining business records, and complying with applicable law. The Company does not sell personal information. California residents have the right to: (i) know what personal information is collected; (ii) know whether personal information is disclosed; (iii) opt out of the sale of personal information (not applicable here); (iv) access and delete personal information subject to certain exceptions; and (v) non-discrimination for exercising CCPA rights. To submit a CCPA request, contact: privacy@allnurestoration.com or 909-557-4225.

GOVERNING LAW

GOVERNING LAW; SEVERABILITY: This agreement shall be governed by the laws of the State of California without regard to its conflict-of-laws principles. If any provision of this agreement is found invalid or unenforceable, the remaining provisions shall continue in full force and effect.

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