

ESTIMATE

Your business name

Street address

City, State ZIP

Email / phone

License # / Tax ID

Estimate #

Date

Valid until

PREPARED FOR

JOB

Job

Site

SCOPE OF WORK

Description	Qty	Unit	Rate	Amount

NOTES

Subtotal

Discount

Tax

Estimate total

Deposit due on acceptance

Optional items (not included in the total)	Qty	Unit	Rate	Amount

EXCLUSIONS

TERMS

This estimate is based on the scope described above and is valid until the date shown. Work outside this scope will be quoted as a written change order before it starts. Payment: deposit on acceptance, balance due on completion.

ACCEPTANCE

By signing below, the customer accepts this estimate, its scope and terms, and authorizes the work.

Customer signature

Date

Printed name