

FROM

Your business name _____

Address _____

Phone · email _____

BILL TO

Client name _____

Client address _____

Phone · email _____

ESTIMATE #	DATE	VALID UNTIL
_____	_____	_____
PROPERTY ADDRESS	SCHEDULE (WEEKLY / BI-WEEKLY / MONTHLY)	
_____	_____	

DESCRIPTION	QTY × RATE	AMOUNT
Standard / deep / move-out clean — date		
Hourly crew (cleaners × hours × rate)		
Add-on: oven / fridge / windows / laundry		
Supplies (included / billed)		
Travel / parking		

NOTES & PAYMENT TERMS

This estimate is valid for 30 days. Final invoice may vary if the scope changes; any change will be approved in writing before work continues. Deposit of 30% due on acceptance.

Subtotal

Tax

ESTIMATED TOTAL _____