

FROM

Your business name _____

Address _____

Phone · email _____

BILL TO

Client name _____

Client address _____

Phone · email _____

ESTIMATE #	DATE	VALID UNTIL
_____	_____	_____
JOB ADDRESS	LICENSE #	
_____	_____	

DESCRIPTION	QTY × RATE	AMOUNT
Labor (crew × hours × rate)		
Materials (receipts attached)		
Equipment rental		
Permits and fees		
Change order #		
Disposal / cleanup		

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 _____