

FROM

Your business name _____

Address _____

Phone · email _____

BILL TO

Client name _____

Client address _____

Phone · email _____

ESTIMATE #	DATE	VALID UNTIL
ORIGIN → DESTINATION, DATE	USDOT / MC # OR STATE LIC.	ESTIMATE / ORDER #
VALUATION OPTION		

DESCRIPTION	QTY × RATE	AMOUNT
Labor: crew size, start–end times (hours × rate)		
Travel time / trip fee		
Long distance: weight (lb) × rate, from scale ticket		
Packing labor (hours × rate) / materials (count × price)		
Extras: stairs, long carry, shuttle, piano, bulky items		
Valuation coverage option / deposit (negative)		

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