

ESTIMATE

Pest Control estimate template
avoinvoice.com

FROM

Your business name _____

Address _____

Phone · email _____

BILL TO

Client name _____

Client address _____

Phone · email _____

ESTIMATE #	DATE	VALID UNTIL
_____	_____	_____
SERVICE ADDRESS	BUSINESS LIC. # / TECHNICIAN LIC. #	PLAN / PERIOD
_____	_____	_____
TECHNICIAN		

DESCRIPTION	QTY × RATE	AMOUNT
Service: type, target pests, areas treated		
Plan visit: plan name, period, date		
Products applied: name, EPA reg. #, rate / amount		
Bait stations / traps (count × price)		
Re-treat under warranty (no charge)		
Exclusion or repair work		

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 _____