COMPANY NAME

ESTIMATE

PHONE

EMAIL

LICENSE #

INSURED BY

ESTIMATE #

DATE

VALID UNTIL

PREPARED FOR

CLIENT NAME

PHONE / EMAIL

JOB ADDRESS

STREET

CITY / STATE / ZIP

ROOFLINE FT / STORIES

DISPLAY PLAN (ROOFLINE, TREES, BUSHES, DECOR)

LINE ITEMS

#	ITEM (ROOFLINE PER FT, TREES, BUSHES, DECOR, OR POWER)	QTY	UNIT PRICE	AMOUNT
1				
2				
3				
4				
5				
6				

Subtotal

Tax

Total

PAYMENT TERMS

Lights: leased / customer-owned (circle)

Install: _____ Takedown: _____

Deposit to hold the date: _____

Balance due on install unless otherwise noted.

NOTES AND EXCLUSIONS

ACCEPTANCE

By signing below, the client accepts this estimate and authorizes the work described above.

CLIENT SIGNATURE / DATE

CONTRACTOR SIGNATURE / DATE

Valid 30 days. Takedown is included unless noted; weather or roof access may reschedule the install.

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