[Your Business Name]

[Street Address]
[City, State ZIP]
[Phone] · [Email]
[Website]
License #: [License Number]

ESTIMATE

Estimate #	[0001]
Date	[MM/DD/YYYY]
Valid until	[MM/DD/YYYY]
Prepared by	[Name]

PREPARED FOR

[Customer Name]
[Mailing Address]
[City, State ZIP]
[Phone] · [Email]

JOB SITE AND ROOF

[Job Site Address], [City, State ZIP]
Roof: [asphalt shingle] · Pitch: [6/12]
Measured: [00] sq · Waste: [00]% · Order: [00] sq
Existing layers: [1] · Deck: [OSB / plank / plywood]

SCOPE OF WORK

[Describe the work in plain language, e.g. Tear off to the deck, replace damaged decking, install new underlayment, ice and water shield, flashing, drip edge, vents and shingles; clean up and haul away all debris.]

Description	Qty	Unit	Rate	Amount
Tear-off and disposal				
[Tear-off, 1 layer (each extra layer $0.00/sq)]	[00]	[sq]	[$0.00]	[$0.00]
[Dumpster / dump trailer and disposal]	[1]	[ea]	[$0.00]	[$0.00]
Decking (allowance; extra sheets at the rate shown)				
[Decking replacement allowance, 7/16" OSB, 4x8 sheet]	[0]	[sheet]	[$0.00]	[$0.00]
Underlayment, flashing and ventilation				
[Synthetic underlayment]	[00]	[sq]	[$0.00]	[$0.00]
[Ice and water shield: eaves, valleys, penetrations]	[00]	[lf]	[$0.00]	[$0.00]
[Drip edge, step / wall flashing, pipe boots]	[1]	[lot]	[$0.00]	[$0.00]
[Ridge vent / intake vents]	[00]	[lf]	[$0.00]	[$0.00]
Roofing material and installation				
[Shingles, brand and line, incl. starter and ridge cap]	[00]	[sq]	[$0.00]	[$0.00]
Permit and other charges				
[Permit]	[1]	[ea]	[$0.00]	[$0.00]

Subtotal	[$0.00]
Sales tax ([0.00]%)	[$0.00]
Estimate total	**[$0.00]**

MATERIAL OPTIONS (CUSTOMER INITIALS THE CHOICE)

□ Option A: [product, line and color] · Manufacturer warranty: [name, term] · Total: [$0.00]
□ Option B: [product, line and color] · Manufacturer warranty: [name, term] · Total: [$0.00]
□ Option C: [product, line and color] · Manufacturer warranty: [name, term] · Total: [$0.00]

DECKING AND HIDDEN DAMAGE

This estimate includes [0] sheets of decking. Additional sheets: [$0.00] each, installed.
Additional layers found at tear-off: [$0.00] per square per layer.
We will show you damaged areas or photos before replacing more than the allowance.
The final invoice adjusts for the actual count.

NOT INCLUDED

[Gutters, fascia and soffit repair, unless listed above].
[Chimney rebuilds, skylight replacement, interior repairs].
[Rot or structural damage beyond decking].
Other changes will be quoted in writing before work proceeds.

WORKMANSHIP WARRANTY

[Your Business Name] warrants its installation for [X] years from completion against leaks and failures caused by workmanship.
Not covered: [storm and wind damage beyond product ratings, damage by others, work by other contractors, lack of maintenance].
To make a claim: [phone / email].

MANUFACTURER WARRANTY

Product warranty: [manufacturer, warranty name and term].
Registration: [who registers it and when].
Coverage is provided by the manufacturer on its own terms; a copy of the warranty is available on request.

PAYMENT SCHEDULE

Deposit: [$0.00 / 0%] on acceptance
[Progress payment: $0.00 on material delivery]
Balance: [$0.00 / 0%] on completion
We accept: [card, ACH / bank transfer, check]

INSURANCE CLAIM (IF APPLICABLE)

Claim #: [Number] · Carrier: [Name]
Adjuster: [Name, phone]
The customer is responsible for paying the policy deductible.
Differences from the insurer's scope will be documented in writing.

TERMS

This estimate is based on the inspection and information available on the date above and is valid until the date shown. Work is scheduled after acceptance and the deposit, weather permitting. [Add your cancellation notice, lien notice and any other notices your state requires.]

Customer signature (accepts option ___)	Date	Contractor signature	Date

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