ESTIMATE

Estimate no.

Date

Valid until

FROM

Business name

Address

Phone / email

PREPARED FOR

Customer name

Address

Phone / email

Job address

Planned start date

SCOPE OF WORK

List items or assessed volume, access, stairs, loading and disposal arrangements.

Description	Unit	Qty	Rate	Amount
Minimum Load (up to 1/8 truck	each			
Couch/Sofa	each			
Hot Tub Removal	each			
Additional Labor (per man	hour			
1/3 Truck Load	each			

NOT INCLUDED

Identify hazardous materials, prohibited items and items requiring separate disposal charges.

Subtotal

Tax rate (%)

Tax

Total

Deposit to book (if any)

CUSTOMER APPROVAL

I accept this estimate and the scope of work above.

Signature

Printed name

Date