[Your logo here]

ROOFING ESTIMATE

YOUR COMPANY NAME

License / registration #: _____

Phone: _____

Email: _____

Address: _____

Estimate #: _____

Date: _____

Valid until: _____

Prepared for	Job address

Scope of work

Describe the work in plain words: what you will do, which products you will use (brand, model, color) and where on the property.

Roof area (sq ft)	Squares	Layers to remove	Shingle (brand, line, color)

Item and description	Qty	Unit	Unit price	Total
			Subtotal	
			Sales tax	
			TOTAL	
			Deposit due at signing	
			Balance	

Decking and hidden damage

Rotted or damaged roof decking is not included. If we find it after tear-off, we photo it, show you, and replace it at $_____ per sheet.

Allowances

List each allowance item and the amount included (for example: ice and water shield in valleys and eaves, 4 rolls). Anything beyond that is added by change order.

Not included

List what this price does not cover (for example: hidden damage, mold, electrical or structural upgrades, permit fees if billed separately).

Schedule

Estimated start: _____ Estimated completion: _____

Payment schedule

Deposit at signing: $_____ (check your state: some states cap deposits).
Progress payment: $_____ when _____ is complete.
Final payment: $_____ at completion and walkthrough.

Terms

1. This estimate is good until the date above. After that, we may need to re-price materials.
2. Any change to the scope or price is made by a written change order signed by both of us before the extra work is done.
3. If we find a condition that could not be seen when we priced the job, we stop, show you photos and give you a written price before going ahead.
4. Permits are pulled by: _____.
5. Add any notice your state requires here (for example, a notice of your right to cancel, or the California down payment notice in 12-point bold).

Acceptance

By signing, you accept this estimate, its terms and the payment schedule above.

Customer signature: _____ Date: _____

Contractor signature: _____ Date: _____

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