**ROOFING ESTIMATE**

|  |  |  |
| --- | --- | --- |
| **Company Name** |  |  |
| 123 Company Address Drive |  |
| Fourth Floor, Suite 412 |  | **JOB NAME** | **ESTIMATE PREPARED BY** | **CONTRACTOR LICENSE NUMBER** | **ESTIMATE NUMBER** |
| Company City, NY 11101 |  |   |   |   |   |
| 321-654-9870 |  | **DATE OF ESTIMATE** | **ESTIMATED START DATE** | **ESTIMATED END DATE** | **DATE ESTIMATE VALID THROUGH** |
| email@address.com |  |   |   |   |   |
| webaddress.com  |  | **S T A T U S A N D J O B D E T A I L S** |  |  | **M A T E R I A L S** |   |   |   |
| **CLIENT NAME** |  | Currently Leaking? |  | **MATERIALS DESCRIPTION** | **QTY** | **COST** | **AMOUNT** |
|   |  | History of Leaking? |  |  |   |   |   |
| **CLIENT BILLING ADDRESS** |  | Drainage and Leak Details |  |   |   |   |   |
|   |  | Inspection Date | Year Installed | Roof Size | Roof Height | Roof Shape | No. of Layers |   |   |   |   |
|   |  |  |  |  |  |  |  |   |   |   |   |
|   |  | Roof Surface | Roof Membrane | Deck | HVAC Equip. | Other Equip. | Skylights |   |   |   |   |
|   |  |  |  |  |  |  |  |   |   |   |   |
| **CLIENT PHONE** |  | **SHINGLES** |   |   |   |   |   |
|   |  |   |   |   |   |
| **CLIENT EMAIL** |  |   |   |   |   |
|   |  |  | **EST. MATERIALS TOTAL** |  |
| **ADDRESS OF JOB** |  | **UNDERLAYMENT / INTERLAYMENT** |   | **L A B O R** |   |   |   |
|   |  | **LABOR DESCRIPTION** | **HOURS** | **RATE** | **AMOUNT** |
|   |  |   |   |   |   |
|   |  | **FLASHING** |   |   |   |   |   |
|   |  |   |   |   |   |
| **ADDITIONAL COMMENTS** |  |   |   |   |   |
|   |  | **INSTALLATION** |   |   |   |   |   |
|  |   |   |   |   |
|  |   |   |   |   |
|  | **EXCLUSIONS / ADDITIONS** |   |   |   |   |   |
|  |   |   |   |   |
|  |  | **EST. LABOR TOTAL** |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | **AUTHORIZED SIGNATURE** |  | **DATE** |   | **ESTIMATED TOTAL** |  |

|  |
| --- |
|  |