

ESTIMATE

Business name

Street address

City, State ZIP

Phone

Email

License #

Estimate #

Date

Valid until

Prepared by

PREPARED FOR

Client name

Mailing address

City, State ZIP

Phone or email

JOB SITE

Job site address

City, State ZIP

SCOPE OF WORK

DESCRIPTION	UNIT	QTY	UNIT PRICE	AMOUNT
Service and panel				
Main service panel	ea			
Sub-panel	ea			
Standard breaker	ea			
Dual-function AFCI/GFCI breaker	ea			
Surge suppressor	ea			
HVAC disconnect	ea			
Rough-in and wire				
NM cable 12/2	ft			
NM cable 14/2	ft			
NM cable 12/3	ft			
4/0 aluminum SER feeder	ft			
Device boxes	ea			
Rough-in box, fixture or ceiling	ea			
Heavy-duty fan box	ea			

DESCRIPTION	UNIT	QTY	UNIT PRICE	AMOUNT
Devices and trim				
Duplex receptacle	ea			
GFCI receptacle	ea			
3-way switch	ea			
Dimmer switch	ea			
Cover plates	ea			
Fixtures and safety				
Recessed downlight	ea			
Ceiling fan	ea			
Smoke/CO combination detector	ea			
Labor and coordination				
Licensed electrician labor	hr			
Apprentice labor	hr			
Permit, inspection, and utility coordination	ls			

Payment schedule		Subtotal	
		Tax	%
Exclusions		Total	
		Deposit due at signing	%
		Balance due on completion	

Prices are good until the date above. Changes to this scope are priced and approved in writing before the work is done.

Accepted: signing below approves the scope, price and payment terms in this estimate.

Client signature _____ Date _____

Contractor signature _____ Date _____