

ELECTRICAL ESTIMATE / INVOICE

Subcontractor Name: _____

License #: _____

Date: _____

Project/Ref #: _____

GENERAL CONTRACTOR / CLIENT

Name: _____

Project Name: _____

Site Address: _____

JOB DETAILS

Permit Status: _____

Start Date: _____

Est. Completion: _____

Description of Electrical Work / Materials	Qty/Hrs	Rate	Total
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Rough-in (Wiring, Boxes, Conduit)

Panel / Service Upgrade

Description of Electrical Work / Materials	Qty/Hrs	Rate	Total
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Fixtures & Devices Installation

Labor / Journeyman Hours

Permit / Inspection Fees

Miscellaneous / Other

Subtotal: \$ _____

Tax: \$ _____

TOTAL: \$ _____

TERMS & CONDITIONS

1. Payments due within _____ days of invoice date.
2. Change orders must be authorized in writing before work begins.
3. This quote is valid for _____ days from the date issued.

SUBCONTRACTOR SIGNATURE

CLIENT ACCEPTANCE SIGNATURE