

ROOFING ESTIMATE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone Number] | [Email]

Estimate #: _____
Date: _____
Valid Until: _____

CUSTOMER INFORMATION

[Name]
[Property Address]
[City, State, Zip]
[Phone]

PROJECT SPECIFICATIONS

Roof Type: _____
Pitch/Slope: _____
Square Footage: _____

Description of Materials & Labor	Qty/Sq	Unit Price	Total
Old Roof Tear-off & Disposal			
Underlayment & Ice/Water Shield			
Primary Roofing Material (Shingles/Metal/Tile)			
Flashing, Vents & Drip Edge			

Description of Materials & Labor

Qty/Sq

Unit Price

Total

Installation Labor

Subtotal: \$ _____

Tax: \$ _____

Total: \$ _____

Notes / Warranty Information:

Signature of Approval: _____ *Date:* _____