Roof Proposal

Prepared by:	-
Company Address:	-
City, State, Zip Code:	-
Phone Number:	-
Email:	-
Website:	-
Proposal Prepared For:	
Customer Name:	-
Customer Address:	-
City, State, Zip Code:	-
Phone Number:	-
Email Address:	-
Project Overview	
Date of Propzosal:	-
Proposal Number:	-
Project Start Date:	-
Project Completion Date:	-
Scope of Work	
Inspection and Assessment:	_
· Removal:	_
· Repair:	_
· Installation:	-
· Cleanup:	-

Materials and Products

Roofing Material:	
· Type:	
· Brand:	
· Color:	
Underlayment:	
· Type:	
Ventilation:	
· Type:	
Flashing:	
· Type:	
Warranty:	
Manufacturer's Warranty:	
Workmanship Warranty:	
Cost Breakdown	
Labar Casta	
Labor Costs:	
• Removal:	
Installation:	
· Repairs:	
Material Costs:	
Roofing Material:	
Underlayment:	
 Ventilation: 	

· Flashing:_____

Additional Costs:	
Permit Fees:	-
Disposal Fees:	-
Miscellaneous:	
Total Project Cost:	
Payment Schedule (Amount & Date)	
· Deposit:	-
Progress Payment:	-
Final Payment:	
Project Timeline	
Start Date:	-
Completion Date:	-
Work Hours:	
Terms and Conditions	
Detailed terms and conditions regarding the project's execution	n, payment, warranties,
and other relevant information.	
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Authorization

By signing below, you agree to the terms and conditions outlined in this proposal.

Company Representative:_____

Date:____

Contact Information

For any questions or concerns, please contact:

Customer Signature:

Note: This proposal is valid for _____ days from the date of issuance.