BATHROOM REMODEL ESTIMATE

CONTRACTOR

Business name _____

Address _____

Phone / email _____

License no. _____

ESTIMATE DETAILS

Estimate no. _____

Date _____

Valid until _____

Prepared by _____

CLIENT AND JOB SITE

Client name _____ Phone / email _____

Job site address _____

Room _____

BATHROOM DETAILS

Room size _____ Layout change _____

Fixtures kept _____

Fixtures replaced _____

DEMOLITION AND DISPOSAL

Description	Qty	Unit	Unit price	Amount

Demolition subtotal

PLUMBING

Description	Qty	Unit	Unit price	Amount

Plumbing subtotal

TILE AND SURFACES

Description	Qty	Unit	Unit price	Amount

Tile and surfaces subtotal

ELECTRICAL AND VENTILATION

Description	Qty	Unit	Unit price	Amount

Electrical subtotal	

FIXTURES AND FINISHES (ALLOWANCES)

Description	Qty	Unit	Unit price	Amount

Allowances subtotal	

Subtotal	
Contingency (_____%)	
Sales tax, if applicable (_____%)	
Estimated total	
Proposed deposit (_____%)	

INCLUDED

NOT INCLUDED

ALLOWANCES

PERMITS AND INSPECTIONS

Accepted by (client signature)

Print name

Date

Contractor signature

Based on a site visit and the scope above. Quantities and prices are estimates and may change if the scope changes or hidden conditions are found.