

ESTIMATE SHEET

DATE _____

ESTIMATE FOR:		ESTIMATE BY:	
NAME:	NAME:		
ADDRESS:	ADDRESS:		
PHONE NO:	PHONE NO:		
PROJECT:			
<p>THIS SECTION TO BE COMPLETED BY <u>OWNER</u> (Clearly number and describe your job requirements or questions)</p>	Y E S	N O	<p>THIS SECTION TO BE COMPLETED BY <u>CONTRACTOR</u> (Answer yes or no to each of the owner's numbered job requirements. Comment more fully if necessary.)</p>
			OVER

THIS SECTION TO BE COMPLETED BY OWNER (Clearly number and describe your job requirements or questions)	Y E S	N O	THIS SECTION TO BE COMPLETED BY CONTRACTOR (Answer yes or no to each of the owners numbered job requirements. Comment more fully if necessary)

ESTIMATE: MATERIALS _____

LABOUR _____

TOTAL _____ (incl GST)

SIGNATURE OF CONTRACTOR

c Contractor may attach his standard contract form to this completed form, if so required.

The information on this form is collected under the authority of the Heritage Conservation Act. The information provided will be used to assess the criteria for restoring the exterior of a heritage building. If you have any questions about the collection and use of this information, please contact the Municipal Clerk, 770 Vernon Avenue, Victoria, BC V8X 2W7, Telephone (250) 475-1775.