LANDSCAPE ESTIMATE

CONTRACTOR	OWNER
(Contractor's Name)	(Owner's Name)
(Contractor's License Number)	(Owner's Address)
(Contractor's Address)	(City, State & Zip)
(City, State & Zip)	(Owner's Telephone) (Owner's FAX)
	Email
(Contractor's Telephone) (Contractor's FAX)	(Owner's)
Email	
(Contractor's)	

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ITEM	MATERIALS/COMMENTS	QTY.	\$	TOTAL
Irrigation				
Lawn/Sod		7		
Shrubs/Plants				
A. 1 Gal				
B. 5 Gal				
C. 15 Gal				
D. 24 Gal				
E. 36 Gal				
F. 48 Gal				
Misc.				
Misc.				
Specimens				
Flats-Colors				
Ground Cover				
Drains				
Lighting				
Grading & Debris Removal				
Soil Prep./Fertilizers				
Header Board				
Misc.				
Other				
		GR	AND TOTAL	