

AUTO REPAIR ESTIMATE

Property Water Damage Assessment & Repair

CLIENT NAME	Robert James Mitchell	ESTIMATE NUMBER	EST-WD-2024-0045821
CLIENT PHONE	(217) 555-0142	PREPARED BY	Michael Chen, Senior Estimator
CLIENT ADDRESS	4521 Oakridge Avenue, Springfield, IL 62701		
EST DATE & TIME	10/15/2024 - 10:30 AM	DATE PROMISED	11/05/2024

PROPERTY DETAILS			
PROPERTY TYPE	Residential - Single Family Home	AFFECTED AREA	Master Bedroom - Northeast Wall
LOCATION	Second Floor	SQUARE FOOTAGE	120 sq ft

DAMAGE ASSESSMENT		
<input checked="" type="checkbox"/> Water Intrusion / Leakage	<input checked="" type="checkbox"/> Drywall Damage	<input checked="" type="checkbox"/> Insulation Saturation
<input checked="" type="checkbox"/> Carpet/Flooring Damage	<input type="checkbox"/> Mold Present	<input checked="" type="checkbox"/> Mold Risk Assessment

LABOR COSTS	
LABOR DESCRIPTION	AMOUNT
Water extraction and removal	\$450.00
Drywall removal and disposal	\$320.00
Insulation removal and replacement	\$480.00
Surface preparation and cleaning	\$275.00
Drywall installation and taping	\$680.00
Painting (primer and finish coats)	\$380.00
Carpet removal and disposal	\$220.00
Exterior wall inspection and caulking	\$350.00
Mold remediation assessment	\$420.00
LABOR TOTAL	\$4,175.00

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Materials & Parts				
Part Number	Part Name	Quantity	Price per Unit	Amount
DW-5/8-16	Drywall Sheets (5/8" Fire-Rated)	8 sheets	\$18.50	\$148.00
INS-R15-50	Fiberglass Insulation Batts (R-15)	12 pack	\$85.00	\$85.00
MUD-20LB	Joint Compound (20 lb bucket)	3 buckets	\$22.00	\$66.00
TAPE-2X250	Drywall Joint Tape (2" x 250ft)	2 rolls	\$12.50	\$25.00
PAINT-IH	Interior Primer (1 gallon)	2 gallons	\$35.00	\$70.00
PAINT-INT	Interior Finish Paint (1 gallon)	2 gallons	\$42.00	\$84.00
CARPET-SY	Carpet Replacement (13.3 sq yd)	13.3 sq yd	\$65.00	\$864.50
PAD-110	Carpet Padding	13.3 sq yd	\$12.00	\$159.60
CAULK-10OZ	Exterior Caulk (Silicone 10 oz)	4 tubes	\$8.50	\$34.00
MOLD-TREAT	Mold Remediation Treatment	1 gallon	\$95.00	\$95.00
Parts & Materials Total				\$1,631.10

Insurance Co.	Metropolitan Insurance	SUBTOTAL	\$5,806.10
		TAX RATE %	6.25%
Adjustor	Claims Department	TOTAL TAX	\$362.88
		TOTAL	\$6,168.98

AUTHORIZATION STATEMENT	DATES
You are hereby authorized to make the above repairs and I agree to pay in full according to the terms outlined in this estimate.	Authorization: <input type="text" value="10/15/2024"/>
	Promised: <input type="text" value="11/05/2024"/>
	Delivered: <input type="text"/>
<hr/> Authorizing Party Signature	

DISCLAIMER: The details and estimate provided above are based upon initial inspection and do not constitute a guarantee that no further work/parts will be required. The total bill of work will be as per the details available on completion of the work. Unforeseen damage discovered during the repair process may require additional authorization and charges. Other terms and conditions as applicable.