

REMODELING BID-PROPOSAL

This form complies with professional standards currently in effect

ABCForms, Inc.

License B 0000001
65 Pine Avenue Suite 310
Long Beach, CA 90802

DATE: _____

PROPOSAL NO: _____

Insert your logo here

PHONE (800) 555-5151 CELL (800) 555-5151

<i>and</i> BUYER/ OWNER	NAME		
	PROJECT ADDRESS	STATE/ZIP	PHONE
	ALTERNATE ADDRESS (IF ANY)	STATE/ZIP	PHONE

Remodeling To Begin: _____ Completion Date: _____

Date Of Plans: _____ Architect: _____ Engineer: _____

Work performed at _____

We hereby propose to furnish the following work: _____
(Description If Known)

PROPOSED PAYMENT: Owner agrees to pay Contractor _____ The payment schedule will be: (1) Down payment of \$_____, (2) Payment schedule as follows: _____

NOTE: This proposal may be withdrawn by Contractor _____ days.

ACCEPTANCE: You are hereby authorized to return a formal contract for the work described in the above proposal, for which the undersigned agrees to pay the amount stated in the terms thereof.

OWNER SIGNATURE	DATE
CONTRACTOR SIGNATURE	DATE

