

Customer Name

Happy Customer

3RStimax.

23-CBEE-XXXX

HOUSE Page 1

CLAIM NUMBER

Contractor Name	Right Way Pro Contractors	Phone 1	612 665.XXXX	2	612 544.XXXX
Address	1010 West Oak Street	City	Your City	St	ST/12345
Insured/Customer Name	Happy Customer	Phone 1	763 226.XXXX	2	763 554.XXXX
Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025

Description	Detail	Quantity	RTA Price/Per	RTA Total
ROOFING A			Adjust to Current Pricing	

1	Remove shingles	30 year GAF Arch	27 sq	\$67.20	\$1,814.40
2	Install roofing underlayment	Synthetic	27 sq	\$52.10	\$1,406.70
3	Replace shingles (w/waste)	30 year GAF Arch	30.51 sq	\$310.22	\$9,464.81
4	Remove additional layer(s)	Rear addition	4.5 sq	\$56.26	\$253.17
5	Add for steep pitch	7/12 to 10/12	13 sq	\$46.76	\$607.88
6	Add for steep pitch	11/12 and up	0 sq	\$55.95	\$0.00
7	Add for 2 - 3 story high roof	Upper rear	6 sq	\$44.74	\$268.44
8	Install ice and water shield	With waste	760 sf	\$2.62	\$1,991.20
9	Remove/Replace valley metal	Describe	72 lf	\$7.66	\$551.52
10	Remove/Replace drip edge (new)	Replace with new	156 lf	\$3.36	\$524.16
11	Difficult access / obstructions	Bushes in rear	5 ea	\$32.64	\$163.20
12	Reflash chimney	Large	1 ea	\$449.88	\$449.88
13	Reflash skylight - includes flash kit	Describe	0 ea	\$364.55	\$0.00
14	Remove/Replace skylight w/new	Describe	0 ea	\$995.44	\$0.00
15	Remove/Replace roof sheathing	8" x 4" x 1/2"	5 sht	\$135.00	\$675.00
16	Remove/Replace roof vents	Air Hawk	5 ea	\$82.42	\$412.10
17	Remove/Replace Broan bath vents	Standard size	3 ea	\$59.95	\$179.85
18	Remove/Replace boots, pipe jacks,	Various	5 ea	\$64.95	\$324.75
19	Step flashing	Upper sidewalls	36 lf	\$12.88	\$463.68
20	Furnace cap	Standard size	2 ea	\$67.45	\$134.90
21	Wind turbines	Describe	0 ea	\$295.00	\$0.00
22	Remove/Replace ridge vent	Describe	0 lf	\$10.86	\$0.00
23	Remove/Replace ridge shingles	High profile	126 lf	\$8.21	\$1,034.46
24	Remove/Reset sat dish	Plus re-sync	1 ea	\$244.21	\$244.21
25	Scaffolding charge	X # of days	3 ds	\$146.26	\$438.78
26	Asphalt universal starter	GAF	177 lf	\$2.52	\$446.04
27	Re-nail roof sheathing	Describe	0 sf	\$0.21	\$0.00
28	Paint - roofing	Stacks	2 ea	\$26.44	\$52.88
29	Saddle or cricket	Describe	0 ea	\$576.88	\$0.00
30	Power roof vents	Describe	0 ea	\$499.66	\$0.00
31	Other	Describe	0 ea	\$0.00	\$0.00
32	Other		0 ea	\$0.00	\$0.00
33	Other		0 ea	\$0.00	\$0.00

EXAMPLE OF: "type in your text and/or paste copied text, diagrams, and photos in the new text box":

Separate permits - roofing and siding. Two debris charges - Refuse yard refuses to accept combined roofing and siding plus any additional pertinent info.



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TOTAL ROOFING A

\$21,902.01

Customer Name

Happy Customer

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HOUSE Page 2

CLAIM NUMBER

Contractor Name	Right Way Pro Contractors	Phone 1	612 665.XXXX	2	612 544.XXXX
Address	1010 West Oak Street	City	Your City	St	ST/12345
Insured/Customer Name	Happy Customer	Phone 1	763 226.XXXX	2	763 554.XXXX
Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025

Description	Detail	Quantity	RTA Price/Per	RTA Total
SIDING B				

35	Remove/Replace siding type 1	.034 Vinyl D-4	20 sq	\$526.20	\$10,524.00
36	Remove/Replace siding type 2	Describe	10 sq	\$526.20	\$5,262.00
37	House wrap	Describe	30 sq	\$54.24	\$1,627.20
38	Remove/Replace alum fascia	up to 5 bends - to 8"	100 lf	\$10.44	\$1,044.00
39	Remove/Replace alum fascia	up to 5 bends - to 12"	6 lf	\$12.44	\$74.64
40	Remove/Replace alum box end returns	Describe	5 ea	\$52.24	\$261.20
41	Remove/Replace alum siders edge	Describe	100 lf	\$7.95	\$795.00
42	Remove/Replace alum Soffit up to 2 feet	Describe	0 lf	\$14.29	\$0.00
43	Remove/Replace alum soffit 2 feet plus	Describe	0 lf	\$18.96	\$0.00
44	Remove/Replace alum window trim	Per Opening	9 ea	\$218.74	\$1,968.66
45	Remove/Replace alum door trim	Per Opening	3 ea	\$205.20	\$615.60
46	Remove/Replace alum gar door trim	Per Opening / Per Stall	2 ea	\$267.44	\$534.88
47	Scaffolding charge	X # of days	3 ds	\$146.62	\$439.86
48	Detach/Reset elec. (w/o electrician)	Describe	5 ea	\$150.00	\$750.00
49	Detach/Reset shutters (existing)	Describe	3 pr	\$94.22	\$282.66
50	Window screens	Describe	7 ea	\$69.44	\$486.08
51	Remove/Replace alum gutters/dwnspts	Describe	100 lf	\$11.76	\$1,176.00
52	A/C Replace (Variable)	Avg est equal \$3,695	0 ea	\$3,695.00	\$0.00
53	Detach/reset lights (w/o electrician)	\$100 each if electrician reqrd	6 ea	\$67.95	\$407.70
54	R&R foam backer	Describe	0 sq	\$208.47	\$0.00
55	Paint - siding	Wood post paint	1 ea	\$295.00	\$295.00
56	High charge 2 stories and up	Describe	6 sq	\$48.97	\$293.82
57	Siding kickout at roofing	Describe	5 ea	\$42.25	\$211.25
58	Elec/plumbing J-blocks	Describe	4 ea	\$29.62	\$118.48
59	Install window/door flashings	Describe	70 lf	\$8.10	\$567.00
60	Drip caps	Over windows and doors	70 lf	\$2.77	\$193.90
61	Caulking	Misc	25 lf	\$4.27	\$106.75
62	J type siding channels	Describe	325 lf	\$0.79	\$256.75
63	Other	Describe	0 ea	\$0.00	\$0.00
64	Other	Describe	0 ea	\$0.00	\$0.00
65	Other	Describe	0 ea	\$0.00	\$0.00
66	Other	Describe	0 ea	\$0.00	\$0.00

TOTAL SIDING B

\$28,292.43

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Customer Name

Happy Customer

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23-CBEE-XXXX

HOUSE Page 3

CLAIM NUMBER

Contractor Name	Right Way Pro Contractors	Phone 1	612 665.XXXX	2	612 544.XXXX
Address	1010 West Oak Street	City	Your City	St	ST/12345
Insured/Customer Name	Happy Customer	Phone 1	763 226.XXXX	2	763 554.XXXX
Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025
Description	Detail	Quantity	RTA Price/Per		RTA Total

GC/MISC C

68	Site clean up (non RRP)	Non RRP	1 ea	\$75.00	\$75.00
69	Debris removal/dump chg (non RRP)	Describe - minimum \$150	2 ea	\$150.00	\$300.00
70	Permit 1	Roofing	1 ea	\$250.00	\$250.00
71	Permit 2	Siding	1 ea	\$250.00	\$250.00
72	RRP lead control (pre 1978 bdlg)	Describe - minimum \$75	0 ea	\$75.00	\$0.00
73	Gen contract/gen demolition	Describe - minimum \$100	1 ea	\$100.00	\$100.00
74	RRP build date confirm	Describe - minimum \$50	1 ea	\$50.00	\$50.00
75	Windows	Describe	0 ea	\$0.00	\$0.00
76	Doors	Describe	0 ea	\$0.00	\$0.00
77	Deck work	Clean, sand, stain	1 ea	\$525.00	\$525.00
78	Interior 1	SW bedroom ceiling repair	1 ea	\$375.00	\$375.00
79	Porta potty	Describe	6 ds	\$95.00	\$570.00
80	OSHA requirements / fall protection	Describe - minimum \$50 per day	6 ds	\$50.00	\$300.00
81	Estimating fee	Minimum 1% of job (max \$500)	0 ea	\$0.00	\$0.00
82	Fuel surcharge	Minimum \$50	1 ea	\$50.00	\$50.00
83	Re-inspect fee	Minimum \$100 per job	1 ea	\$100.00	\$100.00
84	Grounds magnetic sweep	Minimum \$75 per job	1 ea	\$75.00	\$75.00
85	Paint - general	Describe	0 ea	\$0.00	\$0.00
86	Supervisor	X # of days	6 ds	\$125.00	\$750.00
87	Other	Describe	0 ea	\$0.00	\$0.00
88	Other	Describe	0 ea	\$0.00	\$0.00
89	Other	Describe	0 ea	\$0.00	\$0.00
90	Other	Describe	0 ea	\$20.00	\$0.00

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ALL TOTALS A + B + C

TOTAL GC/MISC C

\$3,770.00

A + B + C

\$53,964.44

MST x 31.5% of A+B+C

\$16,998.80

x Sales Tx of 6.75%*

\$1,147.42

Sub-Total 1

\$55,111.86

add 14.5% Overhead

\$7,991.22

Sub-Total 2

\$63,103.08

add 14.5% Profit

\$9,149.95

TOTAL REPAIR PRICE

\$72,253.03

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All items listed on this estimate including the TOTAL REPAIR PRICE which includes full and proper General Contractor Overhead and Profit considerations have been explained to us and are acceptable to us as the insured(s) on this ____ day of _____, _____

Customer Name(s) (print name then sign below)

X

Sign - Insured Customer 1

X

Sign - Insured Customer 2

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Review HOUSE Page 3

DATE

8/22/2025

WRITTEN BY

Dave Doneright

TELE #

952 422.XXXX

CELL #

612 336.XXXX

EMAIL

Brten@email.com

ADJSTR 1 / CMPNY

Bob Stay / TPA

ADJSTR 2 / CMPNY

none

ENGR 1 / CMPNY

Dave Done / GHI

Customer Name

Happy Customer

3RStimax.

23-CBEE-XXXX

SPEC Page 1

CLAIM NUMBER

Contractor Name	Right Way Pro Contractors	Phone 1	612 665.XXXX	2	612 544.XXXX
Address	1010 West Oak Street	City	Your City	St	ST/12345
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Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025
Description	Detail	Quantity			

ROOFING A

1	Remove shingles	30 year GAF Arch	27	sq
2	Install roofing underlayment	Synthetic	27	sq
3	Replace shingles (w/waste)	30 year GAF Arch	30.51	sq
4	Remove additional layer(s)	Rear addition	4.5	sq
5	Add for steep pitch	7/12 to 10/12	13	sq
6	Add for steep pitch	11/12 and up	0	sq
7	Add for 2 - 3 story high roof	Upper rear	6	sq
8	Install ice and water shield	With waste	760	sf
9	Remove/Replace valley metal	Describe	72	lf
10	Remove/Replace drip edge (new)	Replace with new	156	lf
11	Difficult access / obstructions	Bushes in rear	5	ea
12	Reflash chimney	Large	1	ea
13	Reflash skylight - includes flash kit	Describe	0	ea
14	Remove/Replace skylight w/new	Describe	0	ea
15	Remove/Replace roof sheathing	8" x 4" x 1/2"	5	sht
16	Remove/Replace roof vents	Air Hawk	5	ea
17	Remove/Replace Broan bath vents	Standard size	3	ea
18	Remove/Replace boots, pipe jacks,	Various	5	ea
19	Step flashing	Upper sidewalls	36	lf
20	Furnace cap	Standard size	2	ea
21	Wind turbines	Describe	0	ea
22	Remove/Replace ridge vent	Describe	0	lf
23	Remove/Replace ridge shingles	High profile	126	lf
24	Remove/Reset sat dish	Plus re-sync	1	ea
25	Scaffolding charge	X # of days	3	ds
26	Asphalt universal starter	GAF	177	lf
27	Re-nail roof sheathing	Describe	0	sf
28	Paint - roofing	Stacks	2	ea
29	Saddle or cricket	Describe	0	ea
30	Power roof vents	Describe	0	ea
31	Other	Describe	0	ea
32	Other	Describe	0	ea
33	Other	Describe	0	ea

LINE ITEM PRICING INFORMATION IS
PROPRIETARY TO THE COMPANY AND IS
THEREFORE NOT INCLUDED.

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Review SPEC Page 1

Customer Name

Happy Customer

3RStimax.

23-CBEE-XXXX

SPEC Page 2

CLAIM NUMBER

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Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025
Description	Detail	Quantity			
SIDING B					

35	Remove/Replace siding type 1	.034 Vinyl D-4	20	sq
36	Remove/Replace siding type 2	Describe	10	sq
37	House wrap	Describe	30	sq
38	Remove/Replace alum fascia	up to 5 bends - to 8"	100	lf
39	Remove/Replace alum fascia	up to 5 bends - to 12"	6	lf
40	Remove/Replace alum box end returns	Describe	5	ea
41	Remove/Replace alum siders edge	Describe	100	lf
42	Remove/Replace alum Soffit up to 2 feet	Describe	0	lf
43	Remove/Replace alum soffit 2 feet plus	Describe	0	lf
44	Remove/Replace alum window trim	Per Opening	9	ea
45	Remove/Replace alum door trim	Per Opening	3	ea
46	Remove/Replace alum gar door trim	Per Opening / Per Stall	2	ea
47	Scaffolding charge	X # of days	3	ds
48	Detach/Reset elec. (w/o electrician)	Describe	5	ea
49	Detach/Reset shutters (existing)	Describe	3	pr
50	Window screens	Describe	7	ea
51	Remove/Replace alum gutters/dwnspts	Describe	100	lf
52	A/C Replace (Variable)	Current market price	0	ea
53	Detach/reset lights (w/o electrician)	Describe	6	ea
54	R&R foam backer	Describe	0	sq
55	Paint - siding	Wood post paint	1	ea
56	High charge 2 stories and up	Describe	6	sq
57	Siding kickout at roofing	Describe	5	ea
58	Elec/plumbing J-blocks	Describe	4	ea
59	Install window/door flashings	Describe	70	lf
60	Drip caps	Over windows and doors	70	lf
61	Caulking	Misc	25	lf
62	J type siding channels	Describe	325	lf
63	Other	Describe	0	ea
64	Other	Describe	0	ea
65	Other	Describe	0	ea
66	Other	Describe	0	ea

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Review SPEC Page 2

Customer Name

Happy Customer

3RStimax.

23-CBEE-XXXX

SPEC Page 3

CLAIM NUMBER

Contractor Name	Right Way Pro Contractors	Phone 1	612 665.XXXX	2	612 544.XXXX
Address	1010 West Oak Street	City	Your City	St	ST/12345
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Address	12588 New Way Road	City	Customer City	St	ST/12345
Insurance Company	State Farmers	Loss Dt	8/10/2025	Dt	8/22/2025
Description	Detail	Quantity			

GC/MISC C

68	Site clean up (non RRP)	Non RRP	1	ea
69	Debris removal/dump chg (non RRP)	Describe - minimum \$150	2	ea
70	Permit 1	Roofing	1	ea
71	Permit 2	Siding	1	ea
72	RRP lead control (pre 1978 bdlg)	Describe - minimum \$75	0	ea
73	Gen contract/gen demolition	Describe - minimum \$100	1	ea
74	RRP build date confirm	Describe - minimum \$50	1	ea
75	Windows	Describe	0	ea
76	Doors	Describe	0	ea
77	Deck work	Clean, sand, stain	1	ea
78	Interior 1	SW bedroom ceiling repair	1	ea
79	Porta Potty	Describe	6	ds
80	OSHA requirements / fall protection	Describe - minimum \$50 per day	6	ds
81	Estimating fee	Minimum 1% of job (max \$500)	0	ea
82	Fuel surcharge	minimum \$50	1	ea
83	Re-inspect fee	Minimum \$100 per job	1	ea
84	Grounds magnetic sweep	Minimum \$75 per job	1	ea
85	Paint - general	Describe	0	ea
86	Supervisor	X # of days	6	ds
87	Other	Describe	0	ea
88	Other	Describe	0	ea
89	Other	Describe	0	ea
90	Other	Describe	0	ea
91	blank			

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MST TOTAL	\$1,147.42
TOTAL REPAIR PRICE	\$72,253.03

All items listed on this estimate including the TOTAL REPAIR PRICE which includes full and proper General Contractor Overhead and Profit considerations have been explained to us and are acceptable to us as the insured(s) on this ____ day of _____, _____

Customer Name(s) (print name then sign below)

X

Sign - Insured Customer 1

X

Sign - Insured Customer 2

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Review SPEC Page 3

DATE	8/22/2025
WRITTEN BY	Dave Doneright
TELE #	952 422.XXXX
CELL #	612 336.XXXX
EMAIL	Brten@email.com
ADJSTR 1 / CMPNY	Bob Stay / TPA
ADJSTR 2 / CMPNY	none
ENGNR 1 / CMPNY	Dave Done / GHI

Customer Name*Happy Customer***3RStimax.****23-CBEE-XXXX****TOTAL REPAIR PRICE****CLAIM NUMBER**

Contractor Name	<i>Right Way Pro Contractors</i>	Phone 1	<i>612 665.XXXX</i>	2	<i>612 544.XXXX</i>
Address	<i>1010 West Oak Street</i>	City	<i>Your City</i>	St	<i>ST/12345</i>
Insured/Customer Name	<i>Happy Customer</i>	Phone 1	<i>763 226.XXXX</i>	2	<i>763 554.XXXX</i>
Address	<i>12588 New Way Road</i>	City	<i>Customer City</i>	St	<i>ST/12345</i>
Insurance Company	<i>State Farmers</i>	Loss Dt	<i>8/10/2025</i>	Dt	<i>8/22/2025</i>

MST TOTAL**\$1,147.42****TOTAL REPAIR PRICE****\$72,253.03**

All items listed on this estimate including the TOTAL REPAIR PRICE which includes full and proper General Contractor Overhead and Profit considerations have been explained to us and are acceptable to us as the insured(s) on this _____ day of _____,

Customer Name(s) (print name then sign below)

DATE *8/22/2025***WRITTEN BY** *Dave Doneright***TELE #** *952 422.XXXX***CELL #** *612 336.XXXX***EMAIL** *Brten@email.com***ADJSTR 1 / CMPNY** *Bob Stay / TPA***ADJSTR 2 / CMPNY** *none***ENGR 1 / CMPNY** *Dave Done / GHI***X**

Sign - Insured Customer 1

X

Sign - Insured Customer 2

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