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LIC# 104.016483 IL  
P.O. Box 8280 Champaign, IL 61826  
3611 N. Staley Rd. Champaign, IL 61822  
Phone: 217-344-8300 Fax: 217-367-3407

**SUBMITTED BY: ADVANCED COMMERCIAL ROOFING**

**ESTIMATOR:** Steve Fox

**EMAIL:** steve.fox@awcroof.com

**PHONE:** 217-344-8300 x7445

<b>CUSTOMER:</b> Rossville School District – Shingle Repair	<b>DATE:</b> September 9, 2016
<b>ADDRESS:</b> 350 N. Chicago St. – Rossville, IL	
<b>ATTN:</b> Crystal	<b>PHONE:</b> 217-748-6666
<b>WE PROPOSE TO FURNISH LABOR &amp; MATERIALS TO COMPLETE THE WORK AS FOLLOWS:</b>	

**Base Bid:**

1. Furnish and install replacement shingles at areas where existing shingles are missing or falling off of roof.

**Base Bid Price: \$2,750.00**

**EXCLUSIONS: Roof deck replacement if required as this would be unforeseen, electric disconnect and reconnect if necessary, lead and asbestos abatement, gutter or downspout work, and any other work not listed above.**

All material is guaranteed to be as specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alternation or deviation from above specifications involving extra costs must be executed upon written orders, and is an extra charge over and above the estimate. It is mutually agreed that all materials and articles furnished hereunder shall remain the property of Commercial Floor Covering or Advanced Commercial Roofing until all payments specified have been made in full. All agreements are contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance. Buyer agrees that if collection becomes necessary, full costs of collection, including reasonable attorney or collection fees and costs, shall be paid by buyer in addition to full invoice amount. Remittance due by terms stated above or as specified on invoice.

**THE PRICES, SPECIFICATIONS AND CONDITIONS OUTLINED IN THIS BID ARE SATISFACTORY AND ARE HEREBY ACCEPTED.  
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED.**

**Date of Acceptance:** \_\_\_\_\_ **Signature:** \_\_\_\_\_