

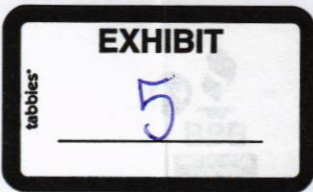


HORN BROTHERS ROOFING

12015 SHILOH RD., STE. 158, DALLAS, TX 75228

OFFICE: (214) 328-6956

FAX: (214) 328-1673



WORK ORDER---COMP/FLAT

PROPERTY OWNER: HOPKINS COUNTY BILLING ADDRESS: _____

INSTALLATION ADDRESS: 228 HINNANT STREET, SULPHUR SPRINGS TX 75482

EMAIL ADDRESS: _____

HOME PH#: _____ CELL#: _____ WORK#: _____

INSURANCE PROVIDER: _____ CLAIM NO: _____ TELEPHONE: _____

PROPOSED BY: Jacob Horn CELL: 214-876-2644

SPECIFICATIONS:

- REMOVE 1 LAYERS EXISTING ROOFING
- INSTALL SYNTHETIC UNDERLAYMENT
- REPLACE ROOF VENTS
- ICE & WATER SHIELD EAVES, VALLEYS & PENETRATIONS
- INSTALL GAF HD2 SHINGLES
STYLE _____ COLOR SHAKEWOOD
- INSTALL MATCHING LOW PROFILE HIP & RIDGE
- PROVIDE MANUFACTURER'S LI YEAR WARRANTY
- PROVIDE STANDARD 2 YEAR WORKMANSHIP WARRANTY
- PROVIDE PERMIT (IF APPLICABLE)
- CLEAN GUTTERS
- PRE-PAINTED DRIP EDGE - COLOR MATCH SHINGLES
- _____ RIDGE VENTS, _____ SOLAR VENTS _____
- ROLL MAGNET

- _____ EXISTING LEAKS _____ YES. _____ NO
- _____ WHERE _____
- _____ EXISTING DAMAGE
- _____ #SKYLIGHTS _____ # CHIMNEYS _____
- _____ SOFFITS _____ OPEN _____ CLOSED
- _____ LOW SLOPE _____ SOLAR PANELS _____
- _____ DRIVEWAY DAMAGED
- _____ PAINT PIPE STACKS & FLANGES TO MATCH
- _____ PITCH _____ ACCESS _____
- _____ STEEP _____
- _____ TWO STORY
- _____ GUTTERS DAMAGED
- GUTTER SIZE: _____ 5" _____ 6"
- COLOR _____ LF _____
- DOWNSPOUTS: 2 X 3 OR 3 X 4
- _____ COVER POOL, LANDSCAPING, PERMANENT FIXTURES

FLAT ROOF TYPE: _____

FLAT ROOF WARRANTY: _____

DELIVERY INSTRUCTIONS: _____

SPECIAL INSTRUCTIONS:

Includes ROOF,
FASCIA REPAIR + PAINT,
SUPERVISOR, DUMPSTERS,
PORTA POTTY, LIFT

Price quote subject to change due to market fluctuations in price for materials, fuel, etc. Contract subject to management approval before execution. WE HEREBY PROPOSE to furnish labor and materials in accordance with the specifications, set out herein, for the sum of:

PAYMENT TERMS:

- \$ 25,566.13 DEPOSIT UPON MATERIAL DELIVERY
- \$ 7,056.50 UPON COMPLETION

\$ 32,622.63

BY SIGNING BELOW YOU ARE ENTERING A CONTRACT FOR PURCHASE OF GOODS AND SERVICES. SEE REVERSE FOR ADDITIONAL TERMS AND CONDITIONS.

MAKE CHECKS PAYABLE TO HORN BROTHERS ROOFING

PROPERTY OWNER OR AUTHORIZED AGENT: _____ DATE: _____

PROPERTY OWNER OR AUTHORIZED AGENT (2ND): _____ DATE: _____

HORN BROTHERS MANAGEMENT APPROVAL: _____ DATE: _____