

Anderson Insulation, Inc.

P.O. Box 30
Saco, ME 04072
www.andersoninsul.com

(800) 472-1717
(207) 653-0331
Fax (207) 602-6185

PROPOSAL

Date: 8/4/2020

Job: 502185

Customer: Michael Cicero

Michael Cicero

Job Address

Workarea

Inventory Item

Phase: 1B Description: Master Bedroom Attic Option #2 - Closed Cell & Roxul

Slopes	R-27 Icynene Closed Cell Spray Foam Insulation MDC - 4in	
Underside of Roof	R-27 Icynene Closed Cell Spray Foam Insulation MDC - 4in	
Gable End Walls	R-14 Icynene ProSeal LE Closed Cell Foam 2 in	
Slopes	R-23 - 5 1/2 X 15 Comfort Batt - Mineral Wool	Note: Installed Over Foam Totaling R-51
Underside of Roof	R-23 - 5 1/2 X 15 Comfort Batt - Mineral Wool	Note: Installed Over Foam Totaling R-51
Gable End Walls	3X15 Sound/Fire Batts - Mineral Wool	Note: Installed Over Foam Totaling R-27
Underside of Roof	Dense Pack Support Netting	
Gable End Walls	Dense Pack Support Netting	

\$6,370.00

ANDERSON INSULATION EXPECTS ALL WORK AREAS TO BE FREE OF DEBRIS AND/OR ANY ITEMS WHICH MIGHT INTERFERE WITH OUR INSTALLATIONS.

We propose hereby to furnish material & labor - complete in accordance with the above specifications, for the sum of : **\$6,370.00**

All material is guaranteed to be as specified. All work to be completed in a workman like manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by workmen's compensation insurance.

Note: this proposal may be withdrawn by us if not accepted within 30 days. A \$25 fee will be added for each returned check. Late fees of 1.5% per month on all balances 30 days past due.

* ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified.

* Terms: Payment Due Upon Completion

DATE: 8/4/2020

Ryan Jeffe
Sales Representative

DATE: _____ SIGNATURE _____

Customer

HIC# 198920