

Appendix D.
Project Estimate Form

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**HURRICANE RESISTANT HOME IMPROVEMENT PROJECT ESTIMATE
FORM**

1. NAME OF ESTIMATOR _____ 3. OWNER _____
2. ADDRESS _____
4. ADDRESS _____
5. OCCUPANT _____
6. OWNER AUTHORIZED RETROFITTING? YES _____ NO _____
7. IF YES OWNER'S SIGNATURE _____
8. TYPE OF CONSTRUCTION: TIMBER _____ CONCRETE _____
9. IF OTHER, BRIEF DESCRIPTION _____
10. SHAPE OF BUILDING
(ATTACH SKETCH WITH DIMENSIONS).
11. SIZE OF BUILDING: LENGTH _____
 WIDTH _____
 TOTAL AREA _____
12. SHAPE OF ROOF: GABLE _____
 HIP _____
 MONO PITCH _____
 OTHER: DESCRIBE _____
13. TYPE OF ROOF COVERING: GALVANIZED _____
 SHINGLES _____
 OTHER: DESCRIBE _____
14. CONDITIONS OF ROOF
COVERING GOOD _____
 POOR _____
 VERY POOR _____

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15. GENERAL CONDITIONS OF BUILDING
GOOD _____
POOR _____
VERY POOR _____

16. ROOF RETROFIT?: YES _____ NO _____

Description	Size	Length	Quantity	Unit Price	Total Price
FASCIA BOARD GALVANIZED SHEETS	_____	_____	_____	_____	_____
GALVANIZE NAILS	_____	_____	_____	_____	_____
RAFTERS PURLINS OR LATHS	_____	_____	_____	_____	_____
ROOF PLATE	_____	_____	_____	_____	_____
RIDGE POLE	_____	_____	_____	_____	_____
HURRICANE TIES	_____	_____	_____	_____	_____
ANCHOR BOLTS	_____	_____	_____	_____	_____

17. TYPE OF FOUNDATION:
CONCRETE PILLARS _____
TIMBER PILLARS _____
LOOSE BLOCKS OR STONES _____
CONTINUOUS CONCRETE _____
WITH FLOOR SLAB _____
OTHER: DESCRIBE _____

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18. RETROFIT FOUNDATION ? YES _____ NO _____

HEIGHT OF FLOOR ABOVE GROUND _____ FEET.

Description	Size	Length	Quantity	Unit Price	Total Price
EXCAVATION	_____	_____	_____	_____	_____
_CONCRETE	_____	_____	_____	_____	_____
BLOCKS	_____	_____	_____	_____	_____
CEMENT	_____	_____	_____	_____	_____
BAGS	_____	_____	_____	_____	_____
SAND	_____	_____	_____	_____	_____
CUBIC YARDS	_____	_____	_____	_____	_____
AGGREGATE	_____	_____	_____	_____	_____
CUBIC YARDS	_____	_____	_____	_____	_____
REINFORCEMENT	_____	_____	_____	_____	_____
STEEL	_____	_____	_____	_____	_____
BINDING WIRE	_____	_____	_____	_____	_____
ANCHOR BOLTS	_____	_____	_____	_____	_____

19. RETROFIT FLOOR? YES _____ NO _____

Description	Size	Length	Quantity	Unit Price	Total Price
FLOOR	_____	_____	_____	_____	_____
_STEEL	_____	_____	_____	_____	_____
BOARDS	_____	_____	_____	_____	_____
NAILS	_____	_____	_____	_____	_____

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20. RETROFIT WALLS? YES _____ NO _____

STUDS: SIZE: _____ LENGTH _____ QUANTITY _____

SIDING: SIZE: _____ LENGTH _____ QUANTITY _____

NAILS: QUANTITY _____

21. ANY OTHER MATERIALS NEEDED FOR RETROFITTING ?

YES _____ NO _____

EXPLAIN AND LIST QUANTITY: _____

ESTIMATOR'S SIGNATURE _____ DATE _____

Do not write beyond this line

FOR OFFICIAL USE ONLY

COMMENTS REVIEW COMMITTEE _____

AMOUNT RECOMMENDED: _____

CHECKED BY: _____ APPROVED BY _____

DATE: _____

DATE: _____