16239

MEMBER: RBB ILCA PGMS PLCAA

SUBURBAN LANDSCAPING

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DATE & TIME: JUNE 2014	HOME / JOB PHONE:
ESTIMATOR: STEVE PORTER	WORK/CELL PHONE: 708/362-2357
ADVERTISEMENT: TRUCKS	FAX: 708/403-8798
MAINT. CUSTOMER (Y/N): NO / IRRIGATION (Y/N): / LIGHTING (Y/N):	DESIGN #: / CREW HOURS:
NAME: VILLAGE OF ORLAND PARK	COMPANY/ CONTACT NAME: TOM MARTIN
ADDRESS: 14700 SOUTH RAVINIA AVENUE	JOB NAME:
CITY: ORLAND PARK STATE: IL ZIP: 60462	JOB LOCATION:

DESCRIPTION OF WORK

WE HEREBY PROPOSE THE FOLLOWING:

1. IN VARIOUS LOCATIONS THROUGHOUT THE VILLAGE, INSTALL SOIL & XL-2000 PREMIUM 5-STRAIN BLUEGRASS SOD. @ $1.80/SQ. YARD

NOTE: EXCESS SOIL REMOVAL WILL BE ADDITIONAL. GRAVEL & CONCRETE REMOVAL WILL BE ADDITIONAL. WATER IS AVAILABLE FOR AN ADDITIONAL CHARGE. PLEASE BUNDLE LOCATIONS TO A MINIMUM OF 5,000 YARDS.

Total: $

PLANTS & MATERIALS	TYPE / SIZE	QTY.

FOR OFFICE USE ONLY

CREDIT CARD NUMBER	EXPIRATION DATE
CAPTURE #/CHECK #	JULIE #
DEPOSIT AMOUNT ☐ 50% $	TIME AND DATE CLEARED
AMOUNT DUE UPON COMPLETION	SUBDIVISION
BILLING ☐ VISA ☐ MASTERCARD ☐ COD ☐ FINANCING	CROSS STREET

MasterCard FINANCING AVAILABLE VISA

6-7-14

PROPOSAL SUBMITTED BY DATE

SEE REVERSE FOR DETAILS AND WATERING INSTRUCTIONS
NOTE: THIS PROPOSAL MAY BE WITHDRAWN BY US IF NOT ACCEPTED WITHIN 90 DAYS.

ACCEPTANCE OF PROPOSAL & TERMS ON REVERSE

PRINT NAME

ADDRESS

SOCIAL SECURITY NUMBER

DATE

PLEASE SIGN AND RETURN TOP COPY.

WHITE - ACCEPTANCE YELLOW - CLIENT PINK - FILE