

## Cost Estimate Form For Extra Work

Contractor: \_\_\_\_\_

Date: \_\_\_\_\_

Description of Work:					
(Please attach a separate sheet if required)					
Hourly Rate as per Contract					
I Direct Costs	No. of Hours	Fire Alarm Technician	Sprinkler & Fire Protection Installer	Electrician	Total
<b>i Direct Labour</b>					
Repair Work Labour					
Emergency Calls Labour					
Total Direct Labour/Other Labour (Specify: _____ )					\$ _____ (i)
<b>ii Direct Material Costs *</b>					
Replacement Parts					
Repair Parts					
Other Material (Specify: _____ )					
Total Direct Material Costs					\$ _____ (ii)
<b>iii Other Direct Costs</b>					
Other (Specify: _____ )					
Total Other Direct Costs					\$ _____ (iii)
<b>II Total Price</b>				<b>Total</b>	
Total Direct Costs (i + ii + iii) (GST/HST extra)					\$ _____

Materials will be charged at our laid-down cost plus a mark-up in accordance with Pricing Schedule 2.

Name: \_\_\_\_\_

(Please print)

Signature: \_\_\_\_\_