



3511 EAST ELLSWORTH
ANN ARBOR 48103

Name MIKE DOLAN Date 5-27-26
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Inspector Name CARL ARSLEY Inspector Phone # 734-634-7017 734-709-2661 ← **BEST**

800-949-0009 • 1-800-4-MR-ROOF • Fax 866-711-7755

SIDING ☐ On Home ☐ On Garage Coloring of Siding _____ Type of Siding _____ D4 D5 DL OTHER _____	TRIM/SOFFIT ☒ On Home ☐ On Garage Coloring of Soffit <u>COUNTRY BEIGE</u> Color of Trim _____ Style <u>3 1/3 HV</u>	HORIZONTAL SIDING ☐ Yes VERTICAL SIDING ☐ Yes	SIDING _____ Sq's TRIM <u>11</u> Sq's SOFFIT <u>19</u> Sq's WALL FURRING _____ Sq's	SCALLOPS ☐ On Home ☐ On Garage SQ. FT. _____ COLOR OF SCALLOPS _____	SHAKE ☐ On Home ☐ On Garage SQ. FT. _____ COLOR OF SHAKE & STYLE _____
TRIM OPENINGS # Windows _____ # Doorwall _____ # Bay/Bow _____ # Doors _____ # Openings _____ NOT TO BE TRIMMED COLOR _____ ACCESSORIES # Light Blocks _____ # Gable Vents _____ Style _____ Size _____ Color _____	OVER GARAGE ☐ Yes OVER GARAGE ☐ Yes	ALUMINUM TEAR OFF (Retrim All Windows) ☒ Yes ☐ No AWNING REMOVAL # Total _____	USE EXISTING GUTTERS ☐ Yes ☒ No GUTTER SIZE ☒ Standard ☐ T. Drain	GUTTERS <u>510</u> # Gutter Ft DOWNES <u>235</u> # 1st Story # 2nd Story _____ # 3rd Story _____ # Total Ft. _____ Of _____ All Gutter & Downs GUTTER COLOR <u>Musket Brown</u>	SHUTTERS # Pairs _____ (X) _____ # (X) _____ # (X) _____ # (X) _____ # STYLE ☐ Louvered ☐ Raised Drain Color _____

ROOF REPLACEMENT YES NO

WINDOW REPLACEMENT YES NO

MASONRY WORK YES NO

1. Seamless Gutter System: _____ ft. add \$ _____ 2. Gutter Protection System: _____ ft. add \$ _____

3. Attic Insulation Upgrades: _____ ft. add \$ _____ 4. Chimney Saver: _____ # Chimney(s) add \$ _____

Comments: TEAR OFF EXISTING ALUMINUM FACIA + VINYL SOFFITS + GUTTERS.

INSTALL NEW SMOOTH ALUMINUM COIL ON ALL FACIA + FREEZE BOARDS, COLOR? X MUSKET BROWN NO WINDOW TRIM.

INSTALL NEW 3 1/3 HIDDEN VENTED VINYL SOFFITS

\$ 30,465 \$ COLOR: COUNTRY BEIGE

INSTALL NEW 6" ALUMINUM BATTENS + DOWN SPOUTS WITH WEDGES; COLOR? X MUSKET BROWN

Down Pay \$ 9000

DEPOSIT 30% \$ _____

SUBTOTAL \$ _____

EST. MONTHLY PAYMENT
With approved credit

\$ _____

PLEASE BE CLEAN + REMOVE ALL DEBRIS

Added Info: ANY REPLACEMENT WOOD IS \$65 PER 4X8 OR 5X8 + 3 1/2 PER FOOT 1X6 FACIA
IF PAYING BY CHECK WITH NO FINANCING \$30,465.00

Notice of Right to Cancel - You the buyer may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the back of this contract for the notice of cancellation form for an explanation of this right. Additional Work Will Only Be Performed If In Writing.

Owners X _____ Owners X _____ Date 7-27-26

Inspector Carl Arsley **FINAL PAYMENT DUE UPON COMPLETION** Finance Cash/Check Other _____

Price Given Is The Cash Or Check Price. If Paying By Credit Card, Please Add 3% Additional Terms & Conditions On Back.