

DATE: 06/07/2024

PO Box 366848 Bonita Springs, FL 34136 Office: (239) 947-4720 Fax: (239) 236-2888 reception@jtsfl.com

## ESTIMATE: 13900

	202 .				
NAME: Enclave at Naples c/o Joan Colosium		COMMUNITY: Enclave at Nap	COMMUNITY: Enclave at Naples		
WORKSITE	1195 Wildwood Lakes Blvd				
CITY/ST/ZIP: Naples, 34104		GATE CODE/ NOTICE: call ahe	GATE CODE/ NOTICE: call ahead		
<b>CONTACT PHONE:</b> (239) 354-3200		EMAIL: encalvenaples@comcas	EMAIL: encalvenaples@comcast.net		
QTY		ESCRIPTION	C	OST	
1	1 Dead Queen Palm remove				
			TOTAL:	\$250.00	

Cleanup upon completion and disposing of generated debris, is included in the total unless specified.

<u>Jour M. Colum</u> (Initial) To better serve the needs of our customers and provide an expeditious quote, photos are utilized to describe the work requested. If authorized to schedule the work based on this estimated cost, the crew foreman will confirm the price upon arrival. If site conditions are different from those depicted in the photo, price may change to reflect actual site conditions and scope of work. If a change in price is required, work will not start without authorization and approval of the change.

We accept multiple forms of payment for your convenience. Fees assessed by your financial institution will be added as recompense for those paid at processing, including 4.3% for all major credit cards, except American Express, and current conversion rates for non-US based currency. Acceptance of Estimate ó The above prices, specifications and conditions are satisfactory and hereby accepted. You are authorized to do the work as specified. I understand that payment is due upon completion. If I do not pay upon completion, I understand that I will be liable for all costs with collection, including attorney's fees, if necessary. Furthermore, I understand that any dispute, action, or litigation arising out of this transaction, the prevailing party shall recover its attorney fees and taxable costs, including without limitation, any pre-suit fees and costs related to the investigation or demands for payment. I understand that interest in the amount of 18% shall accrue on any unpaid amounts owed hereunder. And finally, I understand that if a cancellation becomes necessary, notice must be given prior to the day of service. If cancellation is not received before the crew is dispatched to your address, you agree to pay the minimum trip charge of \$250.00.

Signature of Approval: Joan M. Colosimo

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