

Project # _____

Group Name _____

Homeowner _____

PRELIMINARY WORK SCOPE

Please review this preliminary plan with the homeowner, noting that this is subject to approval and change.

	<u>Cost</u>
Task 1: _____	_____
Task 2: _____	_____
Task 3: _____	_____
Task 4: _____	_____
Task 5: _____	_____
Task 6: _____	_____
Task 7: _____	_____
Task 8: _____	_____
Task 9: _____	_____
Task 10: _____	_____

RT-AFF Project Budget \$ _____ **Amount Needed** \$ _____

Due March 26, 2018 - Return to:

Rebuilding Together-AFF, 10723 Main Street, Suite 135, Fairfax, VA 22030
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