

# Service Quotation

## Agency Details

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

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email / Phone: \_\_\_\_\_

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

Quotation Ref.: \_\_\_\_\_

## Client Details

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

Company (if any): \_\_\_\_\_

Contact: \_\_\_\_\_

Email / Phone: \_\_\_\_\_

## Scope of Services

- Service 1: \_\_\_\_\_
- Service 2: \_\_\_\_\_
- Service 3: \_\_\_\_\_

## Quotation

Description	Unit/Qty	Unit Price	Amount
Service 1	_____ _____ _____	_____ _____ _____	_____ _____ _____
Service 2	_____ _____ _____	_____ _____ _____	_____ _____ _____
Service 3	_____ _____ _____	_____ _____ _____	_____ _____ _____
Subtotal			_____
Tax (%)			_____
Total			_____

## Terms & Conditions

- Payment Terms: \_\_\_\_\_
- Validity: \_\_\_\_\_
- Delivery/Completion Timeline: \_\_\_\_\_
- Other Notes: \_\_\_\_\_

---

Authorized Signature (Agency)

Client Approval