Project Proposal

PREPARED BY

Your business name

Street address

City, State ZIP

Email

Phone

Tax ID or registration number, if you have one

PREPARED FOR

Client name

Attention: contact name

Street address

City, State ZIP

Email

Project	
Date	
Valid until	

Background

Why this project exists, in two or three sentences.

Objectives

- Objective 1, with a number or a date if you can
- Objective 2
- Objective 3

Scope

In scope	Out of scope

Milestones

Milestone	Deliverable	Due

Budget

Milestone	Qty	Rate	Amount
		Subtotal	
		Contingency (_____%)	
		Project budget	

Risks and assumptions

-

  What you assume the client will provide
-

  What could delay the project

How we will measure success

-

  A measurable result and when you will check it

Approval

CLIENT

_____

_____

Date

PROVIDER

_____

_____

Date