


|  |  |
| --- | --- |
| [Company Name] |  |

**[Project Name]**

**[Technical Estimate]**

Author: [your name], [your title]

[your company]

Date: [today’s date]

Write the description below

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Known Constraints

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Estimating Approach

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Risk Assessment

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| --- |
| **Risk 1: Risk title goes here**  |
| Likelihood: Low | Moderate | High |
| Severity: Low | Moderate | Severe |
| Risk description goes here |
| Potential impact* Impact 1
* Impact 2
* Impact 3
* Impact 4
* Impact 5
 |
| RecommendationsTo avoid the risk:1. Recommendation 1
2. Recommendation 2
3. Recommendation 3
4. Recommendation 4
5. Recommendation 5
6. Recommendation 6
7. Recommendation 7
8. Recommendation 8
 |

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| --- |
| **Risk 2: Risk title goes here** |
| Likelihood: Low | Moderate | High |
| Severity: Low | Moderate | Severe |
| Risk description goes here |
| Potential impact* Impact 1
* Impact 2
* Impact 3
 |
| Recommendations1. Recommendation 1
2. Recommendation 2
3. Recommendation 3
 |

|  |
| --- |
| **Risk X: Risk title goes here** |
| Likelihood: Low | Moderate | High |
| Severity: Low | Moderate | Severe |
| Risk description goes here |
| Potential impact* Impact 1
* Impact 2
 |
| Recommendations1. Recommendation 1
2. Recommendation 2
 |

Estimated Totals / Costs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item / Name** | **Description** | **Hours** | **Rate / Hours** | **Sub Cost** |
| 1 | Task 1  | 15 | 40 | 600.00 |
| 2 | Task 2 | 10 | 50 | 500.00 |
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|  |  |  |  |  |
| Total Hours |  | Total Cost | 1100.00 |

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| --- | --- | --- | --- | --- |
| Signature: |  |  | Date: |  |

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