



**EXHIBIT 4**

**ESTIMATE APPROVAL OF SUBMITTED BILL  
for  
ENVIRONMENTAL ADAPTATION SERVICES**

Dear \_\_\_\_\_

This form constitutes official approval of your bid that was submitted on \_\_\_\_\_  
for completion of a chore service for \_\_\_\_\_,  
a client of the Supported Aging Program of Salt Lake County Aging & Adult Services.

NAME OF CONTRACTED VENDOR: \_\_\_\_\_

CASE MANAGER: \_\_\_\_\_

CLIENT NAME: \_\_\_\_\_

CLIENT ADDRESS: \_\_\_\_\_

CLIENT PHONE: \_\_\_\_\_

AUTHORIZED COST OF THE WORK AS PER YOUR BID: \$ \_\_\_\_\_

Projected date of completion: \_\_\_\_\_

*Case manager will have the client contact you  
to schedule necessary appointments for initiating and completing work.*

**ONCE YOU HAVE COMPLETED THE WORK,  
PLEASE NOTIFY THE CASE MANAGER FOR FINAL APPROVAL OF THE WORK.**