

Architectural Design Scope Agreement

Date: [Insert Date]

Client Name: [Client Name]

Client Address: [Client Address]

City, State, Zip: [City, State, Zip]

Architect Name: [Architect Name]

Firm Name: [Firm Name]

Firm Address: [Firm Address]

City, State, Zip: [City, State, Zip]

Scope of Services

1. Initial Consultation
2. Site Analysis
3. Concept Design Development
4. Design Refinement
5. Construction Documentation
6. Permit Procurement

Project Timeline

Start Date: [Start Date]

Completion Date: [Completion Date]

Compensation

The total fee for architectural design services is [Insert Fee], payable in the following installments:

- [Installment 1 Details]
- [Installment 2 Details]
- [Installment 3 Details]

Agreement

By signing below, both parties agree to the terms outlined in this agreement.

Client Signature: _____ Date: _____

Architect Signature: _____ Date: _____