

RETAINER INVOICE

[Business Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: [00000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO [Client Name]
[Client Address]
[City, State, Zip]
[Email Address]
PROJECT / SITE [Project Name]
[Site Address or Lot Number]
[Service Type: Maintenance / Design / Installation]

Description of Retainer Services	Amount
Landscaping Service Retainer Fee Pre-payment for scheduled services or priority scheduling for [Season/Year].	\$0.00
Initial Consultation & Site Planning Non-refundable deposit for site assessment and material logistics.	\$0.00

Subtotal: \$0.00
Tax: \$0.00
Total Due: \$0.00

NOTES & TERMS

This retainer fee is required prior to the commencement of work. Retainer amounts will be applied to final project billing as outlined in the service contract. Please make checks payable to **[Business Name]** or pay via [Payment Method].