

# INVOICE

Recurring Hardscaping Maintenance

**[Company Name]**

[Address Line 1]

[Phone Number]

[Email/Website]

## BILL TO

[Client Name]

[Client Address]

[Client Phone]

**Invoice #:** [0000]

**Date:** [MM/DD/YYYY]

**Service Period:** [Month, Year]

**Due Date:** [MM/DD/YYYY]

Description of Service	Frequency	Rate	Amount
Paver Weed Control & Debris Blow-off	[Monthly/Bi-Weekly]	\$0.00	\$0.00
Joint Sand Inspection & Top-off	[Per Visit]	\$0.00	\$0.00

Description of Service	Frequency	Rate	Amount
Retaining Wall Inspection & Drainage Check	[Quarterly]	\$0.00	\$0.00
Hardscape Power Wash / Spot Cleaning	[Service Date]	\$0.00	\$0.00

Subtotal: \$0.00  
Tax: \$0.00

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**Total Amount: \$0.00**

**Notes:** Next scheduled maintenance visit: [Date]. Sealant integrity checked and verified.

**Payment Terms:** Please make checks payable to [Company Name] or pay online via the link provided in your email. Thank you for your business!