

INVOICE

[Contractor/Company Name]
[License Number]
[Phone Number]
[Email Address]

Invoice #: _____
Date: _____
Due Date: _____

CLIENT:

[Customer Name]
[Installation Address]
[City, State, Zip]

PROJECT:

Residential Synthetic Slate
Total Squares: _____
Color/Style: _____

Description of Materials & Labor	Qty/Sq	Rate	Amount
Synthetic Slate Tiles (Brand/Model: _____)			\$
Underlayment & Ice/Water Shield			\$

Description of Materials & Labor	Qty/Sq	Rate	Amount
Flashings (Drip Edge, Valleys, Chimney)			\$
Installation Labor (Tear-off & Disposal)			\$
Installation Labor (Synthetic Slate Application)			\$
Miscellaneous (Ventilation, Ridge Caps, Nails)			\$
Subtotal: \$			
Tax: \$			

Total Amount: \$

Terms & Conditions:

1. Warranty: [Number]-year workmanship warranty included.
2. Manufacturer warranty on synthetic slate materials provided upon final payment.
3. Payment terms: Net [Number] days. Late fees may apply.