

# INTERIM OCCUPANCY INVOICE

[Company Name]  
[Business Address]  
[City, State, Zip]  
[Tax ID]

**Invoice #:** [00000]

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

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

## BILL TO

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**[Tenant Name/Entity]**  
[Contact Person]  
[Billing Address]  
[Phone/Email]

## PROPERTY DETAILS

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**[Project/Building Name]**  
Unit/Suite: [Number]  
Occupancy Start: [Date]  
Anticipated Closing: [Date]

DESCRIPTION OF INTERIM CHARGES	PERIOD	AMOUNT
Interim Occupancy Fee (Monthly Equivalent)	[Dates]	\$0.00
Estimated Common Area Maintenance (CAM)	[Dates]	\$0.00

DESCRIPTION OF INTERIM CHARGES	PERIOD	AMOUNT
Property Tax Allotment (Pro-rated)	[Dates]	\$0.00
Utilities / Metered Services	[Dates]	\$0.00

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

**NOTES & PAYMENT INSTRUCTIONS**

Please make all checks payable to **[Entity Name]**. For wire transfers, use the following: Routing: [Number] | Account: [Number]. This invoice represents interim occupancy costs prior to final title transfer as per the Commercial Purchase Agreement.