DEPOSIT INVOICE

Company Name
License #: [License Number]
Street Address
City, State, Zip

Invoice #: [0000]
Date: [MM/DD/YYYY]
Project Name: [Project Name]

CLIENT / OWNER

[Client Name]
[Service Address]
[City, State, Zip]
[Phone Number]

PROJECT DETAILS

Agreement Date: [MM/DD/YYYY]
Estimated Start: [MM/DD/YYYY]
Work Type: [Residential Construction]

Description	Percentage/Type	Amount
Initial Mobilization & Commitment Deposit	[00]%	$0.00
Pre-construction Planning & Permitting Fees	Fixed	$0.00
Special Order Materials Down Payment	Deposit	$0.00

Subtotal: $0.00
Tax (if applicable): $0.00

TOTAL DEPOSIT DUE: $0.00

PAYMENT TERMS

Please make all checks payable to: **[Company Name]**

Note: This deposit is required to secure project scheduling and initiate material procurement as per the Residential Construction Agreement. This amount will be credited toward the final contract sum.