DOWN PAYMENT INVOICE

Project: Residential Remodel

Invoice #: _________
Date: _________

CONTRACTOR

[Company Name]
[Address Line 1]
[City, State, Zip]
[License #]

CLIENT / PROPERTY

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

Description of Services / Scope	Amount
Total Contract Price (Estimate)	$ 0.00
Down Payment (____% of Total) Due prior to project commencement for mobilization and materials.	**$ 0.00**

Amount Due: $ 0.00

PAYMENT INSTRUCTIONS

Please make checks payable to: **[Company Name]**
For Wire/ACH: [Bank Name] | Account: [Number] | Routing: [Number]
Due Date: Upon Receipt

Note: This deposit is non-refundable once materials have been ordered or site preparation has begun. Remaining balance to be paid per the schedule outlined in the primary construction contract.