

DEPOSIT INVOICE

[Business Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

CLIENT / PROPERTY OWNER

[Name]
[Mailing Address]
[Phone Number]

PROJECT LOCATION

[Site Address/Lot Number]
[City, State, Zip]
[Project Reference/Permit #]

Description of Preparation Services	Total Quote	Deposit %	Amount
Site Preparation Deposit: [e.g., Clearing, Grading, Excavation]	\$0.00	0%	\$0.00

Subtotal: \$0.00

Tax (if applicable): \$0.00

DEPOSIT DUE: \$0.00

Payment Instructions: [e.g., Bank Transfer / Check / Credit Card]

Terms: This deposit is required to secure scheduling and mobilize equipment. Deposit is [refundable/non-refundable] as per the signed Site Preparation Agreement.