

DEPOSIT INVOICE

[Company Name]

[Street Address]

[City, State, Zip]

[Phone/Email]

Invoice #: _____

Date: _____

Account #: _____

BILL TO:

[Client Name]

[Client Address]

[Client Contact Number]

HIRE PERIOD:

Start Date: _____

End Date: _____

Site Location: _____

Equipment Description (Model/Serial)	Hire Rate	Security Deposit
[e.g. Vibratory Plate Compactor / Rammer]	\$ _____	\$ _____
[e.g. Smooth Drum Roller / Trench Roller]	\$ _____	\$ _____

Subtotal: \$ _____

Tax: \$ _____

TOTAL DEPOSIT DUE: \$ _____

Payment Terms: Deposit must be paid in full prior to equipment mobilization. Deposits are refundable upon off-hire inspection, subject to equipment condition and fuel levels.

Bank Details: [Bank Name] | **Account:** [Number] | **Ref:** [Invoice #]