

DEPOSIT INVOICE

Rapid Installation Plumbing

[Business Address]

[Phone Number]

[Email/License #]

Invoice #: _____

Date: _____

Due Date: _____

BILL TO:

[Client Name]

[Service Address]

[Phone]

PROJECT / SITE:

[Installation Location Details]

Description of Installation Services	Total Project Est.	Deposit Amount
[Brief scope of work: e.g., Water Heater Install, Full Repipe, Fixture Setup]	\$	\$

Subtotal: \$ _____

Tax: \$ _____

TOTAL DEPOSIT DUE: \$ _____

Terms: This deposit is required to secure the installation date and procure materials. Remaining balance is due immediately upon completion of the installation. Work will not commence until the deposit is received.

Payment Methods: ☐ Check ☐ Credit Card ☐ Bank Transfer