PLUMBING DEPOSIT INVOICE

URGENT INSTALLATION

[Plumbing Company Name]
[Address Line 1]
[Phone Number]
[License Number]

BILL TO:
[Customer Name]
[Installation Address]
[Phone Number]

Invoice #: [0000]
Date: [Date]
Installation Date: [Date/Time]

Description of Urgent Services/Materials	Estimated Total
[Service Name: e.g., Emergency Water Heater Replacement]	$[0.00]
[Materials/Parts: e.g., Tank, Piping, Fittings]	$[0.00]

Projected Total: $[0.00]
Deposit Percentage: [50]%

DEPOSIT DUE NOW: $[0.00]

Payment Terms:
Deposit is required immediately to secure priority scheduling and procure materials. Balance is due upon completion of installation.

Notes:
[Additional terms or warranty information goes here]