

[ENGINEERING FIRM NAME]

[Street Address]  
[City, State, Zip]  
[License # / Tax ID]

INVOICE

Invoice #: [0000]  
Date: [Date]  
Project ID: [HVAC-000]

BILL TO:  
[Client Company Name]  
[Contact Person]  
[Street Address]  
[City, State, Zip]  
PROJECT SITE / REFERENCE:  
[Industrial Facility Name]  
[Site Address / Phase]  
[Purchase Order #]

| Description of Engineering Services / Equipment                                                  | Qty/Hrs | Unit Price/Rate | Total      |
|--------------------------------------------------------------------------------------------------|---------|-----------------|------------|
| <b>Mechanical Systems Design</b><br>Load calculations, ductwork layout, and P&ID schematics.     | [0.0]   | [\$[0.00]]      | [\$[0.00]] |
| <b>Industrial Chiller Unit - Model [XYZ]</b><br>Procurement and delivery of [Capacity] Ton unit. | [0.0]   | [\$[0.00]]      | [\$[0.00]] |

| Description of Engineering Services / Equipment                                                   | Qty/Hrs | Unit Price/Rate | Total      |
|---------------------------------------------------------------------------------------------------|---------|-----------------|------------|
| <b>Site Inspection &amp; Commissioning</b><br>Final balancing and automation system verification. | [0.0]   | [\$[0.00]]      | [\$[0.00]] |
| <hr/>                                                                                             |         |                 |            |
| Subtotal: \$[0.00]                                                                                |         |                 |            |
| Tax/VAT ([0] %): \$[0.00]                                                                         |         |                 |            |
| Total Balance: \$[0.00]                                                                           |         |                 |            |
| <hr/>                                                                                             |         |                 |            |

**PAYMENT TERMS & NOTES:**

Net [30] days. Please make checks payable to [Firm Name].  
Wire Transfer: [Bank Name] | Account: [00000000] | Routing: [00000000]  
Technical queries regarding this invoice should be directed to [Contact Email/Phone].