HEAVY LIFT SOLUTIONS CO.

123 Industrial Way
Rigging District, ST 90210
Phone: (555) 010-9988

INVOICE

Invoice #: _____
Date: _____
Job #: _____

BILL TO

_____
_____
_____

SITE LOCATION / RIGGING SUPERVISOR

_____
_____
_____

Equipment Description (Model/Capacity)	Serial/ID #	Duration (Hrs/Days)	Rate	Total
			Mobilization / Demobilization Fees	

Equipment Description (Model/Capacity)	Serial/ID #	Duration (Hrs/Days)	Rate	Total
			Operator / Rigger Labor	

Subtotal: $ _____
Tax: $ _____
Amount Due: $ _____

TERMS & CONDITIONS

Payment due within 30 days. Late fees apply to overdue balances. Equipment must be inspected upon delivery. Any damage incurred during rental period is the responsibility of the lessee.