

[COMPANY NAME]

[Address Line 1]
[Address Line 2]
Phone: [Phone Number]
Email: [Email Address]

INVOICE

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

[Client Name]
[Client Address]
[City, State, Zip]
[Contact Phone]

PROJECT / JOB SITE

[Project Name/PO #]
[Site Address]
[Site Supervisor]

Machinery Description (Model/ID)	Rental Period (Start - End)	Rate (Day/Week)	Qty/Duration	Total

Subtotal: \$ _____
Insurance/Damage Waiver: \$ _____
Delivery/Pickup Fee: \$ _____
Tax: \$ _____

Total Amount Due: \$ _____

TERMS & CONDITIONS

1. Payment is due within [Number] days. 2. Machinery must be returned with a full tank of fuel or refueling charges will apply. 3. Customer is responsible for daily maintenance (fluids/greasing) during the rental period. 4. Any damage beyond normal wear and tear will be billed to the client.

Thank you for your business!