

SOLAR SERVICES INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

[Client Name]
[Client Address]
[Client Phone]

PROJECT LOCATION:

[Installation Address / Site Name]
[System Capacity - kW]

Description (Installation/Maintenance)	Qty/Hrs	Unit Price	Total
[Solar Panel Model / Component]			
[Inverter / Mounting Hardware]			
[Labor: Installation / Inspection / Cleaning]			

Description (Installation/Maintenance)	Qty/Hrs	Unit Price	Total
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[Permit Fees / Misc]

Subtotal: \$0.00

Tax: \$0.00

Grand Total: \$0.00

Notes & Warranty:

All maintenance work is guaranteed for [Number] days. Installation includes manufacturer warranties on panels and inverters. Please make checks payable to [Company Name].