

WIND SERVICES LTD.

123 Energy Way, Suite 500
Renewable Park, TX 75001
contact@windservices.com

INVOICE

Invoice #: _____
Date: _____
Due Date: _____

CLIENT / BILL TO:

SITE LOCATION:

Wind Farm: _____
Site Manager: _____
PO Number: _____

TURBINE & BLADE SPECIFICATIONS

Turbine ID: _____ Blade Serial: _____ Position (A/B/C): _____
Damage Type: ☐ Leading Edge ☐ Lightning ☐ Structural ☐ Erosion

Description of Services / Materials	Qty/Hrs	Rate	Total
Blade Surface Preparation & Grinding			
Composite/Resin Lamination Repair			

Description of Services / Materials	Qty/Hrs	Rate	Total
Leading Edge Protection (LEP) Application			
Rope Access / Platform Mobilization			
Consumables (Vacuum bags, resins, etc.)			
Subtotal: \$0.00			
Tax (___%): \$0.00			
Total Due: \$0.00			

Notes: All repairs performed according to OEM specifications. Post-repair inspection reports attached.

Payment Terms: Net 30 days. Please include invoice number with your remittance.