

# PLUMBING INVOICE

**[Company Name]**

[Street Address]

[City, State, Zip]

[Phone] | [Email]

**Invoice #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Project ID:** \_\_\_\_\_

---

**Client / Bill To:**

[Client Name]

[Company Name]

[Billing Address]

[City, State, Zip]

**Job Site Location:**

[Site Name/Manager]

[Property Address]

[City, State, Zip]

Description of Installation Work	Hours/Qty	Rate	Amount
[Labor: Rough-in, Fixture Install, etc.]			
[Materials: Piping, Valves, Fixtures]			
[Permits & Inspection Fees]			

Subtotal: \$0.00

Sales Tax: \$0.00

---

**Total Due: \$0.00**

---

**Terms:** Payment is due within [X] days. Please make checks payable to **[Company Name]**.

**Warranty:** All installation work is guaranteed for a period of [X] months from completion date, excluding fixture manufacturer defects.