PROFORMA INVOICE

Roof Repair Service Co.
123 Contractor Lane
City, State, ZIP

Date: _____
Proforma #: _____
Valid Until: _____

CUSTOMER INFORMATION

Name: _____
Address: _____
Phone: _____

PROJECT DETAILS

Property Type: _____
Roof Material: _____
Estimated Timeline: _____

Description of Service / Materials	Quantity	Unit Price	Total
Leak Inspection & Damage Assessment			
Roof Shingle Replacement (Square Feet)			
Flashing Repair / Installation			
Gutter Cleaning & Debris Removal			
Labor Charges			

Subtotal: $0.00
Tax (%): $0.00

Total Estimate: $0.00

PAYMENT TERMS & NOTES

- This is a proforma invoice based on the initial inspection.
- A deposit of ____% is required to schedule the repair.
- Final pricing may vary based on unforeseen structural damage found during repairs.

Thank you for choosing Roof Repair Service Co. for your roofing needs.