

# DEMOLITION INVOICE

Company Name: \_\_\_\_\_

License #: \_\_\_\_\_

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

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

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**BILL TO:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**SITE ADDRESS (MULTI-UNIT):**

Total Units: \_\_\_\_\_

Permit #: \_\_\_\_\_

Service Description	Unit/Qty	Rate	Total
Site Mobilization & Security Fencing			
Hazardous Material Abatement (Asbestos/Lead)			
Soft Demo (Interior Fixtures/Drywall)			
Structural Demolition (Heavy Machinery)			
Concrete Foundation Removal & Grading			
Debris Hauling & Disposal Fees			

Service Description	Unit/Qty	Rate	Total
Utility Disconnection/Capping			

Subtotal: \$ \_\_\_\_\_

Taxes: \$ \_\_\_\_\_

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**GRAND TOTAL: \$** \_\_\_\_\_

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**Payment Terms:** \_\_\_\_\_

**Notes:** All salvage rights remain with the contractor unless otherwise specified in the contract.