HEAVY HAULAGE CO.

[Street Address]
[City, State, Zip]
Phone: [000-000-0000]

INVOICE

No: [00000]
Date: [MM/DD/YYYY]

BILL TO:

[Client Name]
[Company Name]
[Client Address]
[Contact Number]

TRANSPORT DETAILS:

Permit No: [___________]
Escort Vehicle: [Yes/No]
Job Ref: [___________]

Equipment Description (Make/Model/Serial)	Weight/Dims	Origin / Destination	Rate	Total

Surcharge Descriptions (Fuel, Permits, Pilot Cars, Waiting Time)	Amount

Surcharge Descriptions (Fuel, Permits, Pilot Cars, Waiting Time)	Amount

Subtotal: $0.00
Tax/VAT: $0.00

Total Due: $0.00

Payment Terms: Net [30] Days. Please include Invoice Number with payment.

Notes: All transport conducted under standard heavy haulage terms and conditions. Proof of delivery (POD) attached.