

INDUSTRIAL DESIGN INVOICE

Firm Name: _____

Address: _____

License No: _____

Invoice #: _____

Date: _____

Project ID: _____

CLIENT DETAILS

Client Name: _____

Company: _____

Site Address: _____

PROJECT SCOPE

Facility Type: Industrial Warehouse

Total Area: _____ sq. ft.

Phase: _____

SERVICE DESCRIPTION	PHASE/RATE	QUANTITY/HOURS	AMOUNT
Schematic Design & Site Planning			
Structural Engineering Coordination			
Construction Documents (Blueprints)			
Permit Acquisition Services			

SERVICE DESCRIPTION	PHASE/RATE	QUANTITY/HOURS	AMOUNT
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Project Management & Inspection

Subtotal: \$ _____

Tax/VAT: \$ _____

Total Due: \$ _____

PAYMENT TERMS & NOTES

Please remit payment within 30 days. Architecture remains the intellectual property of the firm until final payment is received. Late fees apply after the due date.