

INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone / Email]

Date: _____
Invoice #: _____
Due Date: _____

Bill To:

[Customer Name]
[Installation Address]
[Customer Phone]
[Customer Email]

System Specs:

Array Size: _____ kW
Battery Cap: _____ kWh
Inverter: _____

Description	Qty	Unit Price	Total
Solar Photovoltaic Panels			
Deep Cycle Battery Bank / Storage			
Off-Grid Inverter / Charger			

Description	Qty	Unit Price	Total
MPPT Charge Controller			
Mounting Rack & Hardware			
Cabling, Fuses & Safety Switchgear			
Professional Installation & Commissioning			

Subtotal: \$ _____

Tax / VAT: \$ _____

Incentives/Rebates: (\$ _____)

Total Balance Due: \$ _____

Terms: All equipment remains property of [Company Name] until full payment is received. Warranty on workmanship: [X] years. Manufacturer warranties apply to hardware components.