

License _____
Street, City, State ZIP
Phone
Email

Your business name

INVOICE

BILL TO **Client name**
Job address
Email
Phone

DATE:
DUE DATE: **On receipt**

DESCRIPTION	QTY	UNIT PRICE	AMOUNT
Asphalt shingle roof tear-off and disposal (per sq ft)			
Roof sheathing replacement over rafters (per sq ft)			
Install synthetic roof underlayment (per sq ft)			
Install ice and water shield at eaves and valleys (per linear ft)			
Install aluminum drip edge (per linear ft)			
Install architectural asphalt shingles (per sq ft)			
Install hip and ridge cap shingles (per linear ft)			
Install shingle-over ridge vent (per linear ft)			
Install pipe boot flashing at vent stack (each)			
Reflash chimney with step and counterflashing (each)			
Final cleanup and magnetic nail sweep (each)			

Subtotal
Total

BALANCE DUE

HOW TO PAY
Zelle, Venmo, check or card: list how to pay here.

TERMS AND CONDITIONS
Payment is due on completion of the roof. Sheathing beyond the allowance is billed at the per-square-foot price on the estimate. Workmanship warranty: _____ years from completion. Shingles carry the manufacturer's warranty. Please include the invoice number with your payment.