

Mold Remediation Invoice

Business name _____

Business phone and email _____

Business mailing address _____

Customer name _____

Service location _____

Document date _____ Reference _____

Invoice date _____ Due date _____

Assessed affected areas _____

Licensed or qualified scope and containment plan _____

Independent assessment and documentation _____

Description	Qty	Rate	Amount

Labor _____ Materials _____ Trip fee _____

Subtotal _____ Tax if applicable _____

Deposit or prior payments _____ Total or balance _____

Work completed and completion date _____

Payment instructions and reference _____

Payment received _____ Method _____ Date _____