

Mister Plumber & Son

V. F. SCARDINA, JR.
Reg. Master Plumber
LICENSED AND INSURED

1823 DIVISION RD.
PASADENA, MD 21122



410-255-5578

INVOICE NO.

DATE OF SERVICE
12/22/09

CUSTOMER NO. 			SAVE THIS INVOICE FOR YOUR GUARANTEE			CUSTOMER CLASS <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL		
CUSTOMER NAME Gina & Andy Saker				CUSTOMER PHONE 799-5184		TENANT PHONE		
BILLING ADDRESS				FEDERAL I.D. NUMBER		PURCHASE ORDER #		
CITY			STATE	ZIP		CHARGE AUTHORIZATION #		
ADDRESS (JOB ADDRESS IF DIFFERENT THAN BILLING ADDRESS)				STATE	ZIP	APARTMENT NO.		TENANT NAME

DESCRIPTION OF WORK

Replaced Old Septic Tank and cleaned
with tile sand
I installed 100' of 4" PVC pipe with three
cleanouts. Back of house - Front yard
Tank Down - and put back fence
Installed by Howard Co.

WORK ORDER AUTHORIZATION I hereby authorize you to perform the above described services and I agree to pay the amounts indicated to the right. I hereby certify that I am duly authorized to order and approve the work requested.		OTHER CHARGES \$		INVOICE AMOUNTS	
SIGNATURE		TOTAL PARTS		\$	
TITLE		LABOR		\$	
TYPE OF SERVICE SEWER & DRAIN <input type="checkbox"/> PLUMBING <input type="checkbox"/> HVAC <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> I.P. <input type="checkbox"/> S.T.P. <input type="checkbox"/>		TERMS OF PAYMENT CREDIT CARD <input type="checkbox"/> CHECK <input type="checkbox"/> NET 30 <input type="checkbox"/> CASH <input type="checkbox"/>		DISCOUNTS \$ TAX EXEMPT TAX TOTAL	
		In the event check is returned, the COMPANY will charge the CUSTOMER a \$25.00 processing fee.		TOTAL \$ 3916.00	

This is to acknowledge completion of the above described work which has been done to my complete satisfaction.

11/11/09 *[Signature]* SERVICE TECHNICIAN'S NAME

One Service Call if Reclogging occurs within ____ days.

ADDITIONAL REMARKS OR ESTIMATES

CVII 3802

\$3916.00