

COMPANY NAME

ADDRESS
ADDRESS
ADDRESS

ELECTRICAL

Work Order/Invoice

000001

TO _____

DATE OF ORDER	HOME PHONE NO.
ORDER TAKEN BY	BUSINESS PHONE NO.
JOB NAME /NUMBER	
JOB LOCATION	
INVOICE DATE	JOB PHONE NO.
CUSTOMER ORDER NO.	<input type="checkbox"/> DAYWORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA
STARTING DATE	<input type="checkbox"/> OVERTIME <input type="checkbox"/> OTHER

INDICATE WITH A CHECK MARK: <input type="checkbox"/> WORK TO BE DONE OR <input type="checkbox"/> WORK COMPLETED	INSTALL	REPAIR	REPLACE	INSPECT	TROUBLESHOOT	ROUGH WIRE	FINISH WIRE	TERMS	DESCRIPTION OF WORK			
									LABOUR	HR.	RA	AMOUNT
TEMPORARY SERVICE												
LIGHT FIXTURE(S)												
SWITCH(ES)												
RECEPTACLE(S)												
RECEPTACLE(S) GFCI												
SERVICE PANEL												
SUB-PANEL												
CIRCUIT BREAKER(S)												
FUSE(S)												
ANTENNA WIRE												
CABLE T.V. WIRE												
TELEPHONE WIRE												
SMOKE DETECTOR												
DOOR CHIME												
CEILING FAN												
BATHROOM FAN LIGHT												
BASEBOARD HEATERS												
FAN DRIVEN HEATERS(S)												
RADIANT PANEL(S)												
RANGE												
RANGE HOOD												
DISHWASHER												
DISPOSAL												
WASHER												
DRYER												
WATER HEATER												
WELL/SUMP PUMP												
HOT TUB/SPA												
POOL LIGHT(S)												
POOL PUMP												
AIR CONDITIONER(S)												
BOILER/FURNACE												
HEAT PUMP												
GENERATOR												
KITCHEN												
DINING ROOM												
LIVING/FAMILY ROOM												
BEDROOM #1 #2												
BEDROOM #3 #4												
BATHROOM #1 #2												
BASEMENT												
GARAGE												
NEW ADDITION												
WORK ORDERED BY _____ I HEREBY ACKNOWLEDGE THE SATISFACTORY COMPLETION OF THE ABOVE DESCRIBED WORK X _____ SIGNATURE _____ DATE _____									TOTAL MATERIALS			
									TOTAL LABOUR			
									OTHER CHARGES			
									SUBTOTAL			
									G.S.T./H.S.T.			
									PST			
									TOTAL			