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| --- | --- |
| **Item****DESCRIPTION** | **fee** |
| PHASE I - 9 South Main Street New Hope PA 18938 | $ 1700 |
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| To pay by credit card, send this [authorization form](http://salemenv.com/SalemDocs/Salem%20CC%20Authorization%20Form%202020.pdf) back with invoice. |  |
| **TOTAL DUE:** | $ 1700 |



Remittance Address | 203 Main Street, PMB 106, Flemington, NJ 08822

Email | rob@salemenv.com

Tax ID | 26-2174801

**23052**

**invoice**

OceanFirst Bank

777 Terrace Avenue, Suite 313
Hasbrouck Heights, NJ 07604

August 28 2024

Net 30 Days

**Date:**

**Terms:**

**Bill**

**To:**