

Payment Terms Agreement

Date: [Insert Date]

Client Name: [Insert Client Name]

Client Address: [Insert Client Address]

Dear [Client Name],

We appreciate the opportunity to work with you and look forward to providing our consulting services. Below are the payment terms applicable to our consulting agreement:

1. Payment Structure

Our consulting fees are structured as follows:

- Hourly Rate: \$[Insert Rate] per hour
- Flat Fee Project: \$[Insert Fee] for the entire project

2. Invoicing

Invoices will be issued:

- Bi-weekly
- Upon completion of milestones

3. Payment Due Date

Payments are due within [Insert Number] days of the invoice date.

4. Late Payment

A late fee of [Insert Percentage]% will apply to payments not received by the due date.

5. Payment Methods

Payments can be made via:

- Bank Transfer
- Credit Card
- Check

If you have any questions regarding these terms, please feel free to reach out. Thank you for your cooperation!

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Contact Information]