



Job Request Form

This form can also be completed electronically using Adobe Acrobat

Phone 1300 720 185
 SA/NT Fax (08) 8284 1293
 WA Fax (08) 9467 0570
 Email info@buildrate.com.au
www.buildrate.com.au

Sender				
Company				
Contact Name				
Address				
Suburb		Postcode		State
Email				
Phone		Fax		
Owner Name				
Site Address				
Suburb		Postcode		State
Council		Your Ref No / Job No		

Construction Specifications			
Wall Type	Floor Type	Floor Coverings	Roof Type
<input type="radio"/> Brick Veneer <input type="radio"/> Double Brick Cavity <input type="radio"/> Weatherboard <input type="radio"/> Concrete Block <input type="radio"/> Fibre Cement Sheet <input type="radio"/> Other _____	<input type="radio"/> Slab on Ground <input type="radio"/> Suspended Slab <input type="radio"/> Timber Upper Floor Type <input type="radio"/> Suspended Slab <input type="radio"/> Timber	<input type="radio"/> Carpet <input type="radio"/> Tiles <input type="radio"/> Timber <input type="radio"/> Vinyl Roof Ventilator <input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Metal <input type="radio"/> Tiles <input type="radio"/> Concrete <input type="radio"/> Other _____ Roof Colour / Absorbance _____

Insulation			
Location	Type	Product R-Value	Reflective Foil
Ceiling			<input type="radio"/> Yes <input type="radio"/> No
Roof			<input type="radio"/> Yes <input type="radio"/> No
External Walls			<input type="radio"/> Yes <input type="radio"/> No
Internal Walls			<input type="radio"/> Yes <input type="radio"/> No
Under Floor			<input type="radio"/> Yes <input type="radio"/> No

Windows			
Window Type		Frame Type	
<input type="radio"/> Standard 3mm <input type="radio"/> Other _____		<input type="radio"/> Aluminium	<input type="radio"/> Timber <input type="radio"/> Other _____
Manufacturer	WERS ID www.wers.net	U-Value	SHGC

Correct window specification is important for the rating, otherwise generic low performing windows will be used.

Additional Information (if applicable please indicate location on plans)

Ventilation		Amount & Location
Weather Seals	<input type="radio"/> Yes <input type="radio"/> No	Windows: _____ Doors: _____
Exhaust Fans <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	Unsealed: _____ Sealed: _____
Downlights <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	Unsealed: _____ Sealed: _____
Ceiling Fans <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	_____
Chimneys <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	Unsealed: _____ Sealed: _____
Unflued Gas Heaters <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	_____
Wall or Ceiling Vents <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	_____
Sunroofs <i>(mark locations)</i>	<input type="radio"/> Yes <input type="radio"/> No	_____
Shading		Amount & Location
External Wall: eg Awnings, Pergolas	<input type="radio"/> Yes <input type="radio"/> No	_____
Windows: eg Proposed External Blinds, Fixed Shades	<input type="radio"/> Yes <input type="radio"/> No	_____

Comments or Further Information

Plans & Documentation

In addition to the information given in this form, please also provide:

- Elevations, Site plans, House plans inc **NORTH** point, floor coverings & additional ventilation locations.
- Window Schedule showing height and width.
- Door Schedule (if possible) showing height and width.
- Electrical Plan showing locations, wattage and if downlights are sealed or unsealed.

Payment is required before any reports or certificates are supplied unless a credit account has been established. All goods, including drawing, illustrations, reports and certificates remain the property of Buildrate until payment is received in full. Any costs associated with the recovery of outstanding debts are payable by the "Sender" of this request form.

Although great care is taken with the processing of requests, Buildrate does not give any warranties or assurances as to the accuracy of the report, and as such, will not be liable for any loss, damage, cost or expense arising from any errors or omissions.

To the best of my knowledge, the above information is true and correct in line with the plan and drawings submitted. I understand the rating could vary should any of the features in this application form, attached plans or specifications be omitted or altered in any way.

Name: _____

Signature: _____

Date: _____



CORPORATE MEMBER

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