

ESTIMATE REQUEST FORM WBS

DATE <u>:</u> ESTIMATOR NAME:				ESTIMATE #					
				ESTIM	ATE REQUIRED:	Std (target 10-15 working days Other, please specify date:			
ESTIMATE TYPE REQUIR	ED	Frame Only PC/BOR	russ C&C	Only	F&T Random	Posi-STR	UT	Other	r ie. Flitch Beams
ESTIMATE DETAILS Customer: Site Address:				LOT NO	te Name <u>:</u> burb Name <u>:</u>				
STANDARD ESTIMATION Foundations/Concret Midfloor Internal Linings/Insul Decks	te Floor		Subfloo Roof Fra Interior	aming		Frame Ra External Retaining	Linings		
JOB TYPE New Re	esidentia	l/Including U	nits	Additi	on/Alteration	Com	mercial		
JOB DETAILS Wind Zone: L M H VH EH <u>S</u> Roof Pitch: Importance Level: IL1 Garage etc, non-habitable IL2 Residential IL3 Critical use building, specific engineered design required					Roof Cladding: Iron Metal Tile Concrete Tile Asphalt Shingle on Ply Other: Wall Cladding 1: Wall Cladding 2: Wall Cladding 3:				
Use internal loadbearing	g for Des	ign Optimisa	tion	YES	NO				
TIMBER TREATMENT All H1.2 unless specified	, list spe	cial requirem	ients:						
HIANDRI fitted Stud Lok fitted Fitted Double 45mm T/F	ANDRI fitted Fly Rafter Id Lok fitted and Ver Rafters		ers, Outriggers ge Nogs NO)	VES NO Ceiling Nog Soffit Sprockets		NO	
-		tairs Heat	ing Pump/Air (Con	Structural Stee Garage Doors	I F	Rainwate	er Syst	:em

I CONFIRM THAT INFORMATION SUPPLIED ABOVE IS AS PER CUSTOMER/BUILDER REQUEST AND I HAVE CHECKED THAT THE PLANS CONTAIN ALL APPROPRIATE DETAILS.