



WA Building Surveyors PTY LTD
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WORK ORDER - ACCEPTANCE OF PROPOSAL

CLIENTS NAME : _____

COMPANY NAME : _____

BUSINESS OFFICE ADDRESS: _____

POSTAL ADDRESS : _____

CONTACT NUMBER OFFICE: _____

CONTACT NUMBER MOBILE: _____

EMAIL ADDRESS: _____

SITE ADDRESS : LOT #: HN #: _____

COUNCIL: BUILDING AREA: NUMBER STORY: BCA CLASS: _____

- | | | | |
|--|--------------------------|-------------------------|--------------------------|
| CERTIFICATE OF DESIGN COMPLIANCE | <input type="checkbox"/> | BUILT STRATA INSPECTION | <input type="checkbox"/> |
| UNAUTHORISED WORK | <input type="checkbox"/> | OCCUPANCY CERTIFICATE | <input type="checkbox"/> |
| CERTIFICATE OF CONSTRUCTION COMPLIANCE | <input type="checkbox"/> | SITE INSPECTION | <input type="checkbox"/> |
| PRE-PURCHASE INSPECTION | <input type="checkbox"/> | OTHER | <input type="checkbox"/> |

NOTES : _____

THE PERSON/ORGANISATION RESPONSIBLE FOR PAYING OUR ACCOUNT IS: _____

NAME: _____

COMPANY: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

PAYMENT TERMS
 CASH CHEQUE EFT

URGENCY ASAP 2 Days 7 Days 21 Days

NAME: _____ **SIGNATURE:** _____ **DATE:** _____