**Spire Quote Request Form**

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| **1** | **The Site Address/Premises****Address**: Click or tap here to enter text.**Postcode:** Click or tap here to enter text. |
| **2** | **Full Description of the work** *e.g Single storey rear extension*Click or tap here to enter text. |
| **3** | **Development Type** Choose an item. |
| **4** | **Clients Details** – e.g Homeowner. *Please give full name, postal address and phone number***Title**: Choose an item.**Name:** Click or tap here to enter text.**Applicants Address same as site address** [ ] **Address (If different):**Click or tap here to enter text.**Postcode:** Click or tap here to enter text.**E-Mail:** Click or tap here to enter text. **Tel:** Click or tap here to enter text. |
| **5** | **Principal Designer (PD) e.g Architect:****Company Name:** Click or tap here to enter text.**Individuals Title**: Choose an item.**Individual’s Full Name:** Click or tap here to enter text.**Address:** Click or tap here to enter text.**Postcode:** Click or tap here to enter text.**E-Mail:** Click or tap here to enter text. **Tel:** Click or tap here to enter text.**Date PD Appointed:** Click or tap to enter a date. |
| **6** | **Principal Contractor (PC) e.g Builder:****Company Name:** Click or tap here to enter text.**Individuals Title**: Choose an item.**Individuals Full Name:** Click or tap here to enter text.**Address:** Click or tap here to enter text.**Postcode:** Click or tap here to enter text.**E-Mail:** Click or tap here to enter text. **Tel:** Click or tap here to enter text.**Date PC Appointed:** Click or tap to enter a date. |
| **7** | **For Accounting purposes** *If different to Applicant please advise who will be responsible for paying invoices.***Same as: Client**[ ]  **Principal Designer** [ ]  **Contractor** [ ]  **Other** [ ] (*Please give details below)***Title**: Choose an item.**Full Name**: Click or tap here to enter text.**Address**: Click or tap here to enter text.**E-mail**: Click or tap here to enter text. **Tel**: Click or tap here to enter text. |
| **8** | **Approximate Floor area of project**Click or tap here to enter text.m2 |
| **9** | **Anticipated Start Date:**Click or tap to enter a date. |
| **10** | **Local Authority** – *Which Local Authority does the property fall under*Click or tap here to enter text. |
| **11** | **Planning Application Number**: Click or tap here to enter text.**Permitted Development/Planning Not Required** [ ]  |
| **12** | **New dwellings or Conversions Only:** **I have** enclosed a copy of the **planning decision notice** [ ] Planning has **Not Yet** been granted [ ] We **Will** be making a new sewer connection [ ] We **Will NOT** be making a new sewer connection [ ] Water consumption of **110** [ ]  **125** [ ]  M42 Cat2 Applicable Yes[ ]  No[ ] M4 Cat3 Applicable Yes [ ]  No [ ] If you are considering **Structural Warranty Cover** on this project, do you consent to Spire sharing your details with warranty companies in order to provide quotations? **Yes** [ ]  **No** [ ] **Please Note**: A **Connectivity Form** will need to be completed before registering this will be issued with your quotation. |
| **13** | **Location Plan:**I have enclosed a Location Plan:[ ] I wish for Spire to obtain a Location Plan:[ ] **\*An additional fee of £30 + VAT will be added to your quotation****\*A location plan is NOT required for Internal Alterations/Loft conversions or Garage conversions** |

Please complete and e-mail this form back to enquiries@spirebcs.co.uk along with any plans/drawings you have for your project and a member of our team will be in touch with you soon.

**Thank you**