**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](mailto: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**