



Insuraplex

RESTORING THE PAST, BUILDING THE FUTURE



Cheltenham and East Keilor



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CLIENT ADDITIONAL WORKS FORM

CLIENT / INSURED NAME

DATE

PROJECT ADDRESS

REFERENCE NUMBER

We would like to make the following changes (please include as much detail as possible including areas and sizes)

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PLEASE SELECT AN APPROPRIATE COSTING OPTION

- ① Please carry out these changes and advise of cost at completion
- ② Advise additional cost prior to proceeding

SIGNATURE

Please return this document once completed to reception@insuraplex.com.au and to your construction manager along with any photos or relevant documentation.