

# Inquiry Form

## ***Personal Details***

Surname: \_\_\_\_\_ First name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

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## ***Requirements***

New House

Rewiring

Extension

Number of bedrooms

Number of bathrooms

Number of other rooms

## ***General***

<u>Description</u>	<u>Number</u>
Standard lights (inside)	<input type="checkbox"/> _____
Outdoor standard lights	<input type="checkbox"/> _____
Outdoor corner lights	<input type="checkbox"/> _____
Downlighters	<input type="checkbox"/> _____
Outdoor downlighters	<input type="checkbox"/> _____
Double sockets	<input type="checkbox"/> _____
TV points	<input type="checkbox"/> _____
Phone points	<input type="checkbox"/> _____
Door bell	<input type="checkbox"/> _____
Smoke alarms+hit detectors	<input type="checkbox"/> _____
Burglar alarm - Sensors	<input type="checkbox"/> _____
Garage	<input type="checkbox"/> _____

Description

Number

**Kitchen**

- Extractor fan point  \_\_\_\_\_
- Dishwasher point  \_\_\_\_\_
- Cooker + oven point  \_\_\_\_\_
- Fridge point  \_\_\_\_\_

**Utility**

- Central heating timer  \_\_\_\_\_
- Washing machine point  \_\_\_\_\_
- Tumble dryer point  \_\_\_\_\_
- Extractor fan  \_\_\_\_\_
- Water heater (suit)  \_\_\_\_\_

**Bathrooms**

- Shaver lights  \_\_\_\_\_
- Shower fans  \_\_\_\_\_
- Electric shower points  \_\_\_\_\_
- Bathroom downlighters  \_\_\_\_\_

Should you have more questions please don't hesitate to write in below.

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Please post this inquiry form to:  
**Mr. Carlos Pastor, Carrick, Carrigart, Letterkenny, Co. Donegal**