

PRELIMINARY QUESTIONNAIRE

Title	Mr. Mrs. Ms. Other
First Name	
Family Name	
Phone Number	P M
E-mail	
Postal Address	
LAND	
Do you have Land?	Yes
-	
If Yes, Please define	Town Block
	Rural Land
	Gradient
	Vegetation
PROPOSED BUILDING	ADDRESS:
Street	
City	
State	
PRELIMINARY HOUSE	RATING:
Do you have a BAL rating?	Yes No No
If yes the BAL rating is:	
Wind rating is:	
PLANS	
Your Own Plans	Yes
Refuge Homes Plans	Yes



PROPOSED DWELLING S	SPECIFICS:		
Bedrooms	Quantity		
Bathrooms/En-suite	Quantity		
Living Room	Yes	No 🔲	
Rumpus Room	Yes	No 🗌	
Family Room	Yes 🗌	No 🗌	
Study	Yes 🗌	No 🗌	
Dining Room	Yes	No 🔲	
Others	Yes	Specify:	
SHED & OUTBUILDINGS			
Garage	Car Quantity		
Machinery Shed	Square Meters		
Landscape Gardening	Yes 🗌	No 🗌	
COMMENTS- Current Sta	atus/Known Obstacles:		
			•••••
	······································		
•••••	······································		