



SERVICE REQUEST FORM		For IDQ use only SR No.: IDQ-2024SR-_____
TEED-Thermal and Environmental Engineering Department Fire Test		Obra No.: _____ Version: IDQ-Q-202401
Client:		P.O. No. (If applicable):
Address:		Tel:
E-Mail:		Fax:
Contact person:		

Price list item no.	Test items	Unit price	Quantity	Amount
4.1.8	Fire Resistance Test for Ceiling Membranes / Horizontal Non-Loadbearing Elements of Construction (BS Standard: BS476-20&22:1987 / BS476-20:1987)			
4.1.8.1	60 min.	\$43,000.00		
4.1.8.2	90 min.	\$46,000.00		
4.1.8.3	120 min.	\$50,000.00		
4.1.8.4	180 min.	\$58,000.00		
4.1.8.5	240 min.	\$65,000.00		
4.1.8.6	Increase the test time from _____ min. to _____ min.			
4.1.13	Postpone of test, service charge (30% of testing fee)			
	No. of service request form			
4.1.14	Overtime installation fee per hour outside the office hours (Less than 1 hour will be calculated as 1 hour)	\$1,000.00		
4.1.15	Cleaning fee of clean up the installation site	\$5,000.00		
4.1.16	Demolition fee of the test specimen	\$8,000.00		
For IDQ use only		Discount :	%	
		Total :	MOP	

Remark :	NOTE : ALL SERVICES ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE PRICE LIST AND REMARKS (4.1).
----------	---

For IDQ use only	AD contact person: _____	<input type="checkbox"/> Cannot provide the related service
	Contact person: _____	

**By signing this SRF, you are aware of and agree to comply with the conditions of service and corresponding remarks in the " IDQ Service Price List" and are bound by them.

Client's acceptance: Signature & company stamp: Date:	Received by: Date:	Approved by: Date:	Confirmed by: Date:
---	---------------------------	---------------------------	----------------------------