



Strata Plan Number

Invoice Number

Date

Day      Month      Year

Claim Number

Job Address

Nature and Cause of Leak

Composition and Condition of Pipe: (corrosion, wear, tear etc)

Procedures Undertaken

*Tracing Services: \* Please attach Invoice*

Tradesman	Rates	Number of hours	Costs (\$)
Plumber	Hours @ \$		\$
Additional Plumber	Hours @ \$		\$
Tiler	Hours @ \$		\$
Labourer	Hours @ \$		\$
Others	Hours @ \$		\$
SUBTOTAL			\$

Materials	Costs (\$)	
Plumbing	\$	
Reinstatement	\$	
SUBTOTAL		\$

**TOTAL COSTS TRADESMAN AND MATERIALS**

\$

*Please provide details of work necessitating attendance of additional plumber(s)*

## Summary of Costs

Costs (\$)		Costs (\$)
Search and Locate		\$
Plumbing Repair		\$
Reinstatement		\$
<b>TOTAL</b>		\$