## Sound Insulation Testing Instruction Form





1 Galena Road London W6 0LT T: +44(0)208 222 8778 F: +44(0)208 222 8575 email: info@kpacoustics.com

## Please complete and return this form at least 24hrs before the site visit

Client name		
Invoicing address		
Contact telephone number(s)	Site telephone number(s)	
Site address		
Your reference   Purchase order	Quote number	

O Full payment to be made within 30 days of the date of issue of our invoice

**O** This is a formal appointment of KP Acoustics Ltd. to undertake and fulfil the scope of work.

• KP Acoustics Terms and Conditions are available upon request.

Print name

Date of issue of our invoice\*

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**Client name** 

Site address

Strike out what does not apply

Power available in test rooms

110V / 240V / No Power

Carpets/timber laminates in place (only for floor tests)

Yes / No

Wall, floor and ceiling surfaces complete

Yes / No

Danger of asbestos

Yes / No

Doors, Windows, cornices and skirting boards in place

Yes / No

Test room unfurnished

Yes / No

Access to both sides of the separating wall/floor

Yes / No

Quiet conditions

Yes / No

Print name

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Signature