## Scope Of Work Statement

## Top 8 Pty Ltd t/a Killcare Marina

Marina Office:

ABN: 69 718 795 717

39 Araluen Drive

Phone: 02 4360 1231

Fax:

KILLCARE NSW 2257 eMail: sales@killcaremarina.com.au

Owner:	Address:			Phone:			
					ľ	Mobile:	
If Incomplete, please, add missing details in the boxes above		(No, Street, Suburb, State, Postcode)				Fax:	
Boat Details:							
If incomplete, please, add missing det	tails in the table below						
Boat Name:	Boat Length:	Hull: Mono	Cat Mu	ulti	Engine:		
Boat Rego:	Boat Beam:	Fibreglas	ss Timber Ste	eel Alumin	ium	hp Ye	ear:
Boat Make:	Boat Draft:	White .				Twin Single	Petrol Diesel
Boat Year:	Boat Weight:	Keel: Centerbo	oard 1/2 3/4	4 Full	Drive:	Stern Drive Inbo	oard Outboard
Boat Type: Motor Cruiser Yacht	Runabout Centre Console			Fu	el Capacity:		
Will You be using a Contractor?	YES NO						
Job Description:		Lift	Service	Fuel	Hull	Starter	Battery
		Clean	Repair	Polish	Drive	Trim/Tilt	Carburation
		Foul	PropSpeed	Detail	Engine	Water Pump	Trailer
		Acid Wash	Anodes	DIY			Test Run

Signed Date: