



Commercial & General Insurance Brokers (Aust) Pty Ltd

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NSW - Owner Builder - Home Warranty Insurance Application Form

IMPORTANT NOTICES

Commercial & General Insurance Brokers (Aust) Pty Ltd (CGIB) is a licensed General Insurance Broker and an accredited Home Warranty Insurance Broker. Your application will be forwarded to our Insurer for approval and issue of the insurance certificate. We will confirm the outcome to you on receipt of their assessment. You may be requested to provide further information. Please feel free to contact us if you would like further details.

COMPLETING THIS FORM

1. Answer all questions. Blanks &/or dashers, or answers 'known to underwriters or brokers' or 'N/A' are not acceptable & will delay consideration of this proposal form;
2. If there is insufficient room to complete a question, please attach a signed & dated addendum;
3. Any documents attached to the proposal form are part of the proposal;
4. Where appropriate, please tick the yes or no box that best indicates your reply;
5. Tab through the fields to enter your reply to each question.

YOUR DUTY OF DISCLOSURE

Before you enter into a contract of general insurance with an Insurers, you have a duty, under the Insurance Contracts Act 1984, to disclose to the insurers every matter which you know, or could reasonably be expected to know, or could reasonably expected to know, is relevant to the Insurer's decision whether to accept the insurance risk and, if so, on what terms. You have the same duty to disclose those matters to the insurers before you renew, extend, vary or reinstate a contract of insurance.

Your duty however does not require disclosure of a matter:

- that diminishes the risk to be undertaken by the insurer;
- that is common knowledge;
- that the insurer know or, in the ordinary course of business as insurers, ought to know;
- as to which compliance with your duty is waived by the insurer.

NON-DISCLOSURE

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

PRIVACY STATEMENT

We and our Insurer panel will only collect personal information from you or about you which is relevant to processing and assessing your application and use it in a way you would reasonably expect. Without this personal information we may not be able to process your application. Please see our privacy policy at: <http://www.cgib.com.au/privacy>

OTHER PRODUCTS & SERVICES

CGIB provide a wide range of general insurance's Construction & Public Liability Insurance.

Please visit us at www.cgib.com.au for further information.

IMPORTANT INFORMATION REQUIRED – *Please attach*

- Complete in full, sign and date this application form
- Copy of the Building Permit
- Copy of the termite report (if applicable)
- Payment of premium (see credit card slip overleaf)
- Provide a Defects inspection report (no older than six months)
- Copy of a rate notice or Certificate of Title
- Copy of the Certificate of Occupancy or Final Notice of Completion

Payment

cgib

Card Number

Expiry Date

Cardholder Name

Amount

																		/				\$
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	---	--	--	--	----

Signature

Name on Card

Building Inspectors Contact List

cgib

Name

Contact Number

State

Best Building Inspections

02 9531 7965

NSW



OWNER-BUILDER HOME WARRANTY INSURANCE APPLICATION

- Please ensure all questions are completed and the declaration at the end of this form is signed prior to lodgement with your insurance broker.
- For any assistance in completing this form please contact your insurance broker.
- This application is to be completed by an Owner-Builder who is selling their property within 6 years of the Owner-Builder work having been completed.
- Please ensure payment is attached prior to lodgement with your broker.
- References in this form to 'builder' and 'building work' include trade and other building contractors/work.

Section 1 - Property Owner Details

Name(s) of all registered owners of the property

Postal Address

State

Postcode

Trading or Company Name (if applicable)

ABN

Forwarding Address after the property sale

State

Postcode

Telephone Number

Mobile Phone Number

Business Phone Number

Facsimile Number

Are you entitled to claim an Input Tax Credit on the Premium?

 No Yes

▶ If Yes, how much - 100% or other?

 %

Section 2 - Address of Property for Sale

Lot Number

or

Street Number

Street Name

Is there more than one dwelling on the property?
(please complete one form for each dwelling)

 No Yes

▶ If Yes, the number of dwellings

Suburb

State

Postcode

Section 3 - Owner-Builder Details

Name of Owner-Builder as per the Owner-Builder Permit

Permit Issue Date

Permit Number

Please attach a copy of the Owner-Builder Permit

Blank for Intermediary Use Only

Section 4 - Owner-Builder Work Details

New Single Dwelling	<input type="checkbox"/>	Renovation/Improvements (non-structural*)	<input type="checkbox"/>	Other (e.g. garage)	<input type="checkbox"/>
Alteration/Addition (structural)	<input type="checkbox"/>	Erected Kit Home	<input type="checkbox"/>		
New Unit/Duplex/Villa (max. 2)	<input type="checkbox"/>	Swimming Pool	<input type="checkbox"/>		

*Includes kitchens, bathrooms, carports and pergolas etc.

Please provide a brief description of the Owner-Builder work undertaken:

Is the dwelling situated in a designated termite area?

No Yes ► Please provide evidence of termite treatment for compliance with AS3660

Date work commenced

 /

Date work completed (date of occupation by owners)

 /

Section 5 - Details of all Contractors/Persons who have carried out work on the Dwelling

(must include any licensed waterproofing membrane installer for any bathrooms/balconies, geotechnical engineers, electrician, plumber etc.)

Type of work	Contractor Name, Address and Telephone No.	Home Warranty Insurer (if known)	Cost of work done
			\$
			\$
			\$
			\$
			\$
			\$

Total Cost of Building Work (including materials)

Name of Principal Certifying Authority

Date of Occupation Certificate

 /

Please attach a copy of the Occupation Certificate.

Section 6 - Inspector Details

Name

Telephone Number

)

Mobile Phone Number

Facsimile Number

)

Email Address

Licence / Registration Number

Qualifications / Memberships

Professional Indemnity Cover

Name of Insurer

Please attach a copy of the Inspection Report (i.e. the 'Defect Report' for the Owner-Builder Work).

Section 7 - Personal Background Information

- Have you at any time ever been refused or declined Home Warranty Insurance? Yes No
- Have you purchased Home Warranty Insurance as an Owner-Builder within the last five years? Yes No
- Have you ever held a licence or certificate as a builder or trade contractor? Yes No
- Have you ever had a claim against you or been directed to repair/replace defective workmanship as a result of a complaint by a Homeowner? Yes No
- Is there any relationship between the Owner-Builder and the purchaser? Yes No
- Have you ever been declared bankrupt or entered into a deed of assignment/composition or been subject to a legal judgement or are currently involved in any legal proceedings? Yes No

If you answered 'Yes' to any of the above questions please provide full details in the space below:

Section 8 - Privacy Statement

NSW Self Insurance Corporation (**SICorp**), is a statutory corporation constituted under the *NSW Self Insurance Corporation Act 2004* (NSW) and is responsible for carrying on the business of providing home warranty insurance for building work done in New South Wales that requires such insurance under the *Home Building Act 1989* (NSW). SICorp is regulated by the *Privacy and Personal Information Protection Act 1998* (NSW) and is required to provide the following information to you in relation to your personal information.

Purpose of Collection

SICorp, through its agents, collects and holds personal information (information or an opinion about an individual whose identity is apparent or can reasonably be ascertained from the information or opinion and which relates to a natural living person) for the purpose of providing home warranty insurance (insurance) in relation to building work requiring such insurance, including:

- evaluating your application;
- providing, administering and managing the insurance services following acceptance of an application; and
- investigating, and if covered, managing and processing claims made in relation to any insurance you have applied for with us.

SICorp and its agents, collect personal information in connection with the purposes listed above, through this application and also from other State or Federal government bodies, your intermediary, our insurance agents, loss assessors, claims investigators, reinsurers, insurance companies, mailing houses, claims reference providers, trade credit reference sources, financial assessors, other service providers, legal and other professional advisers.

Examples of personal information collected include:

- your insurance claim history;
- your credit history;
- your financial status and history; and
- your corporate directorship history.

Disclosure

SICorp or its agents may disclose your personal information in connection with the purposes listed above or as otherwise authorised or required by law, to other State or Federal government bodies, your intermediary, our insurance agents, loss assessors, claims investigators, reinsurers, insurance companies, mailing houses, claims reference providers, trade credit reference sources, financial assessors, other service providers, legal and other professional advisers.

Consequences if information is not provided

Supply of the all information sought in this form is not required by law, however, if you do not provide us with this information we will be unable to consider your application for insurance coverage, administer any policy or manage any claim under the policy.

Access

You can request access to, and correction of, your personal information by contacting the Privacy Contact Officer of your insurance agent, through whom you or your intermediary have sought insurance, and to whom your information has been provided as our agent. In some circumstances we may not agree to allow you access to some or all of the personal information we hold about you such as when it is unlawful to give it to you. In such cases we will give you reasons for our decision.

NSW Self Insurance Corporation PO Box A2615, Sydney South, NSW 1235.

Section 9 - Owner-Builder Declaration

This declaration is to be executed by the Owner-Builder (i.e. the person issued with the Owner-Builder Permit).

I declare that by completing this application and making this declaration, I appoint the intermediary to whom this application is provided as my broker for the purpose of applying for home warranty insurance with SICorp.

I confirm that the details on this application form are true and represent a fair and accurate representation of the affairs of the applicant. If any of the information disclosed in this application alters or materially changes, I will notify my intermediary immediately.*

I acknowledge that SICorp, or its agent, may seek additional information from my intermediary as required from time to time.

I declare that I am currently solvent and can meet all of my financial obligations as and when they fall due.

I acknowledge that SICorp, or its agent, reserves the right to reject this application.

I acknowledge that if my application for home warranty insurance is accepted by SICorp, it is the purchaser and the successors in title to the purchaser who are the beneficiaries and not the applicant/Owner-Builder.

I have read and understood the Privacy Statement section in this application.

For personal applicants

I consent to SICorp and its agents collecting, using and disclosing my personal information in accordance with the Privacy Statement.

For all applicants

If I have disclosed personal information in this form about any other person, I confirm that I am authorised to disclose this information to SICorp and its agents and to consent (and do consent) on that person's behalf to collection, use and disclosure of this and other personal information about them in accordance with the Privacy Statement.

Declared by Owner-Builder (name)

Signature

Date

***NB: Section 103EA of the Home Building Act 1989 (NSW) provides that it is an offence for a person, in connection with an application to an insurer for home warranty insurance, to make a statement (whether orally, in a document or in any other way) knowing that, or being reckless as to whether, the statement is false or misleading or omitting any matter or thing without which the statement is misleading in a material particular.**

Such an offence may be punishable by a penalty of up to \$22,000.

HOME WARRANTY INSURANCE – APPLICATION CHECKLIST

Please ensure you have included the following details and supporting documents (as required) to complete your application lodgement successfully:

- | | |
|---|---|
| <input type="checkbox"/> 'Defects Report' (no older than six months from the date of application). This can only be completed by a registered/accredited building surveyor/consultant/inspector, engineer or architect in the State of NSW, or accredited and insurer approved inspectors from any other State. | <input type="checkbox"/> Copy of the Development Consent and Construction Certificate or Complying Development Certificate. |
| <input type="checkbox"/> Copy of the current Professional Indemnity cover of the above inspector etc. | <input type="checkbox"/> Copy of Certificate of Title / Council Rates Notice. |
| <input type="checkbox"/> Fully completed and signed Application Form. | <input type="checkbox"/> Copy of Termite Treatment Report / Recent Inspection report. |
| | <input type="checkbox"/> Copy of the Electrical and Plumbing Compliance Certificates. |
| | <input type="checkbox"/> Copy of the NSW Fair Trading Owner-Builder Permit. |
| | <input type="checkbox"/> Copy of the Occupation Certificate. |

Section 10 - Payment Method

Paying by Credit Card: Please enter your credit card details in the section below, ensuring you pay the total amount including the credit card surcharge as per your premium chart. We accept MasterCard, and Visa cards only. Payment will only be accepted for individual invoices and must be made in full. **Any changes or corrections must be authorised by the cardholder's signature.**

MasterCard Visa

Amount

Card Number

CCV Number

Expiry Date

Name as shown on Card

Signature

Paying by Cheque: Please ensure your cheque payment is made payable to your nominated Broker and is attached to your Application Form.