

IMPORTANT INFORMATION
please read this first

owner builder assess warranty insurance application form

Owner Builder Assess Warranty Insurance is only available to the registered owner of the property who has obtained a permit from the appropriate permit authority to build as an Owner Builder, or has undertaken works which require Residential Construction Warranty Cover.

Please find attached a copy of the Owner Builder Assess Warranty Insurance form and policy.

Prior to processing your Application the following details/documentation must be attached to your application:

- A **completed and signed copy** of the **application form**;
- A **copy of the Building Permit** (for all works requiring home warranty insurance);
- A **copy of the Certificate of Occupancy** or **Final Notice of Completion** (if the date of your Certificate of Occupancy exceeds 2 years from the issue date of the permit, this may affect your application);
- **Proof of Ownership** (copy of the Certificate of Title/Rates Notice);
- **Plumbing Compliance Certificates** (only applicable for jobs over \$500 after 24/3/97);
- A **copy of applicable Termite Treatment Report** (if in termite prone area);
- **Premium is payable to your accredited insurance broker**;
- A **copy of the Owner Builder Defects Inspection Report** (invalid if over 6 months old from date of application – to be completed only by a registered building surveyor, registered building inspector, architect or engineer).

Please ensure you provide us with a copy of this report as it is not the responsibility of Residential Construction Warranty to forward or fax copies to relevant parties.

You may need to contact this office to establish the premium payable prior to lodging your application. The premium, as quoted at the time of your inquiry, is based on the information provided by you at the time of your inquiry. Should these details vary upon receipt of your application, the premium may increase and you will be notified accordingly. Applications are processed upon receipt of the **Full Premium Payment Only**.

We thank you for your inquiry and please contact this office if you require further information.

Privacy Statement

The Privacy Act 1988 (as amended) now applies and requires us to inform you that:

Purpose of collection

We collect personal information (this is information or an opinion about an individual whose identity is apparent or can reasonably be ascertained and which relates to a natural living person) for the purposes of providing insurance services to you, including:

- evaluating your application;
- evaluating any request for a change to any insurance provided;
- providing, administering and managing the insurance services following acceptance of an application; and
- investigating and, if covered, managing claims made in relation to any issue you have with us or other companies within the same group.

The personal information collected can be used or disclosed by us for a secondary purpose related to those purposes listed above, but only if you would reasonably expect us to use or disclose the information for this secondary purpose. However for sensitive information, the secondary purpose must be directly related to the purposes listed above.

Disclosure

We may disclose your personal information (and receive some personal information from), when necessary and in connection with the purposes listed above, to other companies within the same group, your insurance broker or our agent, Government bodies, loss assessors, claim investigators, reinsurers, other insurance companies, mailing houses, claims reference providers, other service providers, hospitals, medical and health professionals, legal and other professional advisers.

Consequences if information is not provided

If you do not provide us with personal information we need we will be unable to consider your application for insurance cover, administer your policy or manage any claim under your policy.

Access

You can request access to the personal information by writing to your nearest Vero branch or Vero Head Office and providing us with full details of what you would like to know or see.

Privacy Statement issued

Vero Insurance Limited, 465 Victoria Avenue, Chatswood, NSW 2067.

Section 01 owner builder details

Given Name

Surname

Postal Address

State Postcode

Telephone ()

Section 02 site location

Unit Number Lot Number Street Number

Address

State Postcode

Permit Authority

Section 03 building details

Single Homes (new owner) Kit/Transportable

Alteration/Addition Relocatable

Unit/Duplex Swimming Pool

Improvements Other (eg garage)

Job Description

Is dwelling situated in a designated termite area?

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

In instances where plumbing work has been carried out please provide details relating to the licensed plumber who carried out the plumbing work.

Actual Cost of Building Work

\$

Contract of Sale Price of Property

\$

Advertised Sale Price prior to entering into contract of sale

\$

Commencement of Work Date / /
(where no building permit is applicable)

Permit Date *(if applicable)* / /

Project Completion Date / /

Inspection Report Date / /

- Please attach:
- A copy of the applicable Building Permit.
 - Copy of applicable termite treatment and Plumbing Certificate.
 - A copy of Certificate of Occupancy/Final Inspection Certificate.
 - Proof of ownership (Certificate of Title).
 - Owner Builder Defects Inspection Report pursuant to S137B of the Building Act 1993
 - Premium payment.

Section 04 inspector details

Name

Licence Number

Postal Address

State Postcode

Telephone ()

Section 05 owner builder declaration

I/We have not been refused or declined home warranty or similar insurance.

Signature

Date / /

Applications should be returned to:

Accredited Insurance Broker details

Name

ABN

Address

Telephone

Fax

Broker Reference No.

Section 6 builder declaration

I/We acknowledge that if insurance is granted in respect of any building under the policy issued by the insurer Vero Insurance Limited it is the owner who is insured and not me/us as the applicant/builder.

I/We confirm that the details on this application form are true and represent a fair and accurate represent of the affairs of the applicant(s).

I/We acknowledge that the insurer reserves the right to reject any application for insurance and seek additional information from me/us as required from time to time.

Completion of this application or acceptance by the insurer does not create any contract of insurance or give the right to insurance. A separate application must be made in respect to each site address,

For personal applicants

I consent to:

- the use of personal information about me for the purposes shown in the Privacy Statement, and
- the disclosure of personal information about me to, and obtaining personal information from, other parties, including those shown on the Privacy Statement, for any of these purposes.

For all applicants

If I have disclosed personal information about any other person, I confirm that I am authorised to:

- disclose to you personal information about that person and to consent to it use for the purposes shown in the Privacy Statement, and
- consent to disclosure to, and obtaining of other personal information about that person from, other parties, including those shown in the Privacy Statement, for any of these purposes.

Vero Insurance Limited, its officers and insurers, are hereby authorised (from time to time and at any time) to seek such information as they may require concerning the financial position of the applicant from:

1. Suppliers of materials and services, or subcontractors; and/or
2. Credit reporting agencies; and/or
3. The accountants named in this application and providing financial information on my behalf from time to time. Such accountants are authorised and instructed to provide such information to Residential Construction Warranty as it requires whenever requested to do so.

I/We agree to reimburse Vero Insurance Limited for their reasonable costs of investigation any claim. This only applies if we act unreasonably in respect to the claim.

Declared by: print name

For and on behalf of

Signature

Date