



CONSTRUCTION INSURANCE - "Renewal Declaration"

POSTAL ADDRESSES Please return the completed application form and all requested supporting documentation to HIA Insurance Services.	VIC GPO Box 4897 V V, Melbourne VIC 3001 Ph: 1300 554 227 Fax: 03 9666 0290	NSW PO Box 883, North Ryde BC 1670 Ph: 1300 200 201 Fax: 02 9808 7233	SA PO Box 550, Hindmarsh SA 5007 Ph: 1300 600 601 Fax: 08 8340 7599	WA PO Box 1494, DC, Osborne Park WA 6916 Ph: 1300 800 801 Fax: 08 9443 8166
	TAS GPO Box 182, Hobart TAS 7001 Ph: 03 6234 9770 Fax: 03 6234 9735	ACT GPO Box 2188, Canberra ACT 2601 Ph: 02 6230 4985 Fax: 02 6230 0541	NT PO Box 400, Parap NT 0804 Ph: 08 8981 9400 Fax: 08 8981 1706	QLD PO Box 3061, Sth Brisbane QLD 4101 Ph: 07 3255 3600 Fax: 07 3255 3144

CLIENT DETAILS (OFFICE ONLY)		ACCOUNT SERVICER DETAILS (OFFICE ONLY)	
Client Name:		Contact Name:	
Policy No:		Phone No:	Fax No:
Renewal Date:		Email:	

RENEWAL DECLARATION CONTRACT WORKS AND LIABILITY

1. Please advise your ABN: HIA Member Number:

2. What is your registered business address?

3. What is your Registration Licence number? Domestic: **VIC only** Commercial:

4. What is your estimated turnover for the next 12 month period

Residential Work: \$ + Commercial and Industrial Work: \$ + Projects whilst working solely as a sub-contractor: \$

= TOTAL ESTIMATED TURNOVER: \$

5. What is your occupation?

6. Please provide a description of the type of work your business undertakes.

7. Do you engage in manufacturing or associated risks? YES NO

8. Please Indicate the percentage of works relating to the following: (Please ensure that figures add to 100%)

> Residential

New Dwellings % Alterations/additions % Swimming pools %

> Commercial

Retail % Offices % Hospitals / Schools / Universities % New Shopping Centres %

Other % Please Specify:

9. What is the maximum contract value of any one project you will be undertaking? (Please tick one)

\$0-\$500,000 \$500,000-\$1,000,000 \$1,000,000-\$2,000,000 \$2,000,000-\$5,000,000 Exceeding \$5,000,000

10. What limit of liability do you require for Public and Products liability? (Please tick one) \$5 MIL \$10 MIL \$20 MIL

11. Where are your projects usually located? CBD % Suburbs % Rural %

> General Property Insurance:

Your Annual Construction Works policy has automatic cover for tools whilst on the worksite up to \$20,000 - Subject to Policy Conditions.

If you wish to extend cover to 24/7 - anywhere in Australia please complete the amounts required below.
(An additional premium is payable)

Tools of Trade and Plant: \$ Unregistered mobile plant of construction vehicles: \$ Mobile Phones: \$

Stock (Max limit to \$10,000): \$ Laptops - Please sepecify details: \$

13. Have any of your contact details changed? If yes, please provide details.

14. Are you aware of any claims or circumstances that may give rise to a claim; that you have not yet notified to your Insurer? If yes, please provide details.

RENEWAL DECLARATION CONTRACT WORKS AND LIABILITY (Continued)

> Important Information

Does your business carry out any demolition **other** than freestanding houses? NO YES

If "yes", please provide details and we will contact you if any cover variation is required.

Do you work with asbestos? NO YES (Please note: this policy does not cover asbestos work)

If "yes", you will require additional insurance - Please give details of activity below and we will contact you.

- Underpinning, shoring & piling of neighbouring structure's need us to refer the work to your insurer **Please contact us before commencing such work. (A dilapidation report may be required)**
- Excavation greater than 3.5 metres, **Please note the standard policy requires work greater than 3.5 metres to be advised before starting and a geotech report may be required.**

COMBINED BUILDERS WARRANTY INSURANCE OPTION

If you wish to receive a quote for combining your home warranty insurance with your contract works and liability insurance through QBE please complete the following section and sign the builder declaration on page 4

Please note that it is not compulsory to complete this section if you only wish to renew your existing contract works and liability policy

Annual value of works requiring Builders Warranty: \$ "Eligibility" amount

Annual value of other business income: \$

Total Expected Business Income: \$

State(s) of operation seeking cover: NSW ACT VIC SA WA TAS

> Maximum Job Values:

DWELLING TYPES	MAXIMUM CONTRACT VALUE REQUIRED	ESTIMATED NUMBER TO BE CONSTRUCTED	
Single Dwellings	\$ <input type="text"/>	<input type="text"/>	
Alterations - Non-structural works	\$ <input type="text"/>	<input type="text"/>	
Alterations - Structural works	\$ <input type="text"/>	<input type="text"/>	
Kitchens	\$ <input type="text"/>	<input type="text"/>	
Bathrooms	\$ <input type="text"/>	<input type="text"/>	
Kit Homes	\$ <input type="text"/>	<input type="text"/>	
Swimming Pools	\$ <input type="text"/>	<input type="text"/>	
Multi-Unit - up to 3 levels	\$ <input type="text"/> per contract	<input type="text"/> projects	references may be required
High Rise - 4 or more levels	\$ <input type="text"/>	<input type="text"/>	references may be required

Domestic Building Cycle:

Average Lead Time: weeks

Average Build Time: weeks

> Background Information

1. Have you or any business in which you were involved been placed into external administration, liquidation, receivership or a scheme of arrangement (formal or informal) to repay outstanding creditors? NO YES
2. 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? NO YES
3. Are you aware of any information of a material nature that could significantly affect the financial position of your business and influence QBE's acceptance of your application? NO YES
4. Have you or any business in which you were involved ever been insured with another home warranty insurer? NO YES
5. Do you currently have Warranty Eligibility with another Insurer? (attach copy) NO YES
6. Have you or any business for which you were involved ever been declined home warranty insurance? NO YES

COMBINED BUILDERS WARRANTY INSURANCE OPTION (Continued)

7. Has your previous Home Warranty Insurer provider ever paid a claim or are you aware of any circumstances that may give rise to a claim? NO YES
8. Have you previously been disciplined by any Court or Statutory Building Disputes Tribunal which resulted in payment or rectification orders against you or any business in which you were involved? NO YES
9. Do you currently have a bank guarantee or deed of indemnity lodged with any other insurer? NO YES
10. Is the applicant a subsidiary of another entity or have any subsidiary companies? NO YES

If "yes", please give details below:

> Statement of Personal Assets and Liabilities: (photocopy if necessary)

This section requires completion by the following; 1. sole traders 2. both principals of a partnership
3. company directors 4. trust beneficiaries

Principal / Director / Beneficiary Name:

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> assets	Value	> liabilities	Owing
Principal Residence at:		Mortgagee Loan with:	
Other Property at:	\$	Mortgagee Loan with:	\$
Other Property at:	\$	Mortgagee Loan with:	\$
Other Property at:	\$	Mortgagee Loan with:	\$
	\$		\$
Motor vehicle's		Vehicle finance with	
	\$		\$
	\$		\$
	\$		\$
Other Investments		Other loans	
	\$		\$
	\$		\$
Cash at bank with		Credit cards/other loans	
	\$		\$
	\$		\$
Work in progress (sole traders only)		Overdraft (sole traders only)	
\$		\$	
Trade receivables (sole traders only)		Trade payables (sole traders only)	
\$		\$	

Evidence of ownership for all properties listed in this statement of personal Assts & liabilities

COMBINED BUILDERS WARRANTY INSURANCE OPTION (Continued)

> Financial Information required for all Applicants:

Sole Traders and Partnerships:

- Full taxation returns for the past two financial years

Company's and Trust's seeking eligibility:

- Detailed financial reports and notes to the accounts for the past 2 financial years

IMPORTANT INFORMATION

DUTY OF DISCLOSURE

Before you enter into a contract of General Insurance with an Insurer, you have a duty under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of Insurance and, if so on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however, does not require disclosure of matters:

- That diminishes the risk to be undertaken by the Insurer;
 - That is of common knowledge;
 - That your Insurer knows or, in the ordinary course of business, 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 his 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

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 to evaluate your application, to evaluate any request for a change to any insurance provided; to provide, administer and manage the insurance services following acceptance of an application; to investigate and, if covered, manage claims made in relation to any insurance you have with us.

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, when necessary and in connection with the purposes listed above, to HIA Insurance Services / Aon Risk Services, 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.

In addition, we will:

- Give you the opportunity to correct your

personal information, or obtain access to it (some restrictions and a fee may apply);

- Provide the Insurers dispute resolution procedures to you in respect of any complaint you may have regarding your personal information.

CONSEQUENCES IF INFORMATION IS NOT PROVIDED

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

ACCESS

Further information can be obtained by contacting the QBE Compliance Manager by **telephone** (02) 9375 4656 or by **fax** (02) 8275 9022 or **email** to compliance.manager@qbe.com.

BUILDERS WARRANTY ELIGIBILITY (IF APPLICABLE)

1. On issuance of an individual Residential Builders Warranty Certificate, it is the owner who is the insured and not the applicant / builder.
2. I / We have received a copy of the "Residential Builders Warranty Insurance" policy wording and agree on behalf of the applicant to be bound by the terms and conditions contained in it.
3. A Certificate of Insurance cannot be issued until this application has been accepted by the Insurer and a "Letter of Eligibility" issued.
4. On issuance of a "Letter of Eligibility", in the event of a complaint or a claim then the contractor, sole trader, or company and the company directors or partnership and the individual partners are joint and severally liable for the following:
 - To comply with the directions or any judgements made by the Tribunal or Australian Courts to complete or rectify building works.
 - Reimburse the Insurer any amount in respect to a claim paid, which includes any costs or expenses incurred by the Insurer.
5. The Insurer has the right to revoke Eligibility of the applicant to purchase individual Job Specific Policies under certain circumstances.
6. The Applicant authorises the insurer to give to, or obtain from, other insurers or insurance reference bureaus, credit reporting agencies and government departments any information about this completed application and the applicants' insurance claims and credit history.

BUILDER DECLARATION

I / We declare that:

1. I / We have read and understood the "Important Information" outlined in this information which includes the Privacy Statement, Duty of Disclosure Statement and Builders Warranty Eligibility (if applicable).
2. I / We believe that the applicant is solvent and in its capacity can meet all of its financial obligations as and when they fall due.
3. If any of the risk classes denoted under the HIAIS Construction and Warranty Facility are cancelled during the period of insurance, the premium payable may be adjusted by the Insurer.
4. If any of the information disclosed in this application alters or materially changes, I / We will notify the Insurer immediately.
5. I / We declare that all information given in this application and any attachments are true and correct.

Declared by: (print name)

For and on behalf of:

Position:

Signature:

Date:

Declared by: (print name)

For and on behalf of:

Position:

Signature:

Date: