

Specific Cover Extension - Owner Builder

Insured Name			
<input type="text"/>			
Policy Number	Due Date of Policy	Initial project commencement date	
<input type="text"/>	<input type="text" value="/"/>	<input type="text" value="/"/>	
Address of Works			State
<input type="text"/>			<input type="text"/>
Postcode			<input type="text"/>
Length of extension required	Original project value insured	Cost of works done	Final project value
<input type="text" value="/"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>	<input type="text" value="\$"/>
Details of works completed			
<input type="text"/>			
<input type="text"/>			
<input type="text"/>			
Details of works remaining			
<input type="text"/>			
<input type="text"/>			
<input type="text"/>			
Reason for delay			
<input type="text"/>			
<input type="text"/>			
Site security			
<input type="text"/>			
<input type="text"/>			

CLAIMS/INCIDENTS

I/We confirm by signature below that there have been no claims or incidents that have not been reported to the insurer.

- NOTES:**
1. If extension of cover is granted it is on the understanding that no appliances will be installed or stored on site until lock up is fully completed and the dwelling fully secured.
 2. Insurers may request a higher excess for the extension period.
 3. Granting of this extension in no way commits the insurer to further extensions of cover.

Insured Name	
<input type="text"/>	
Signature	Date
<input type="text"/>	<input type="text" value="/"/>

OFFICE DETAILS

VIC	GPO Box 4897 V V, Melbourne VIC 3001 Ph: 1300 554 227 Fax: 03 9666 0290
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