

Warranty Insurance Application *for kitchen & bathroom builders*

Section 1 - General Information (all applicants to complete)

Name of Applicant business (i.e. legal name under which you contract)

Trading name (s) (please attach a copy of your certificate of Business Registration)

ABN	What date did this business commence trading?	ACN
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

The Applicant business trades as a: Sole Trader Partnership Company Trust Please attach a copy of trust deed

Street address	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Business Phone Number	Name of key contact	Mobile Phone Number (of key contact)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Facsimile Number	Email (of key contact)
<input type="text"/>	<input type="text"/>

Domestic Licence No	HIA Membership No	Expiry Date
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

States/Territories of operation: NSW VIC ACT SA WA TAS NT QLD

Section 2 - Business and personal background information

Please tick Yes or No

1. Has any director, partner, proprietor, principal/major shareholder or manager of your business:

- a. Been involved with a business (including the Applicant) where the Statutory building dispute Tribunal has made an order for rectification or payment or aware of any Court, Tribunal or arbitration hearing involving or in any way related to home building work undertaken by your business? Yes No
- b. Been involved with a business placed in external administration, a scheme of arrangement, receivership, liquidation or provisional liquidation? Yes No
- c. Been declared bankrupt, entered into a deed of assignment, composition, scheme of arrangement with creditors, or been subject to a legal judgment or currently have legal proceedings pending? Yes No
- d. Been charged with or convicted of any criminal offence in the past 10 years? Yes No
- e. Had an application for home warranty insurance rejected, declined or withdrawn by an Insurer or required special terms to be applied by an insurer? Yes No
- f. Been a director, partner, proprietor, principal/major shareholder or manager of a business that has:
 - i) had an application for home warranty insurance rejected, declined or withdrawn by an Insurer or required special terms to be applied by an insurer? Yes No
 - ii) had a builder's licence/registration refused, cancelled or suspended in any state or territory of Australia? Yes No
 - iii) had a home warranty insurer ever pay a claim? Yes No
 - iv) given any form of security to another home warranty insurer (e.g. Deed of Indemnity/Assurance, Bank Guarantee, Personal Guarantee or similar document)? If yes, please advise when the security was provided, the name of the Insurer to whom it was provided and the amount of any Bank Guarantees. Yes No
 - v) aware of any circumstances that may give rise to a claim (e.g. any notification of a claim from your current or prior home warranty insurer, or from any current or former client)? Yes No

2. Is your business currently eligible for home warranty insurance with another insurer? If yes, please provide a copy of your current approved 'Eligibility limit', together with a Work in Progress Report (Available from your intermediary). Yes No

3. Do you intend to claim 100% of your input tax entitlements for the GST applicable to future policy premiums? Yes No
 If 'No', please advise what percentage you intend to claim %

Please provide detailed explanation to any questions answered 'Yes' to questions 1-3 above

Section 3 - Previous Building Turnover

TURNOVER BREAKDOWN

Past Financial Year as at (dd/mm/yyyy) / /20

Previous Financial Year

Residential Turnover

\$

\$

Commercial Turnover

\$

\$

If no building activity in past 2 years, what has been the nature of your employment or business over the past 3 years?

Estimated Annual Turnover

\$

Estimated number of projects under \$50,000:

1-20

20-50

50+

Section 4 - Statement of assets and liabilities – personal

Please complete this Statement for each Director, Partner and Proprietor of the Business (copy the Table if applicable for multiple parties)
Please list the persons/ parties whose assets and liabilities have been included within the Table.

Name

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Assets	Value	Liabilities	Value
Principal residence at		Mortgage loan with	
	\$		\$
Other property at (copies of rates notices for each property required)		Mortgage loan with	
	\$		\$
	\$		\$
	\$		\$
Motor vehicle's		Vehicle finance with	
	\$		\$
	\$		\$
	\$		\$
Other investments		Other loans	
	\$		\$
	\$		\$
	\$		\$
Cash at bank with		Credit cards/other loans	
	\$		\$
	\$		\$

Section 5 - Financial Assessment

Supporting documentation required

- Companies/Trusts Last 2 years Financial Reports
- Sole Traders/Partnerships – Last 2 Years Tax returns (not assessment notices)

HIA Insurance Services Office Details

VIC

GPO Box 4897 VV, 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

Website: www.hiainsurance.com.au

Section 6 – Applicants Declaration, Signed by all principals, directors or partners (as applicable)

This declaration is to be executed by either the sole business proprietor/all partners in a partnership/sole directors (if only one to sign) or at least two directors of the Company.

I/We declare that:

1. By completing this application and making this declaration, I/we appoint HIA Insurance Services (HIAIS) as our broker for the purposes of applying for eligibility to purchase individual job specific policies for home warranty insurance with the HIAIS Panel of Insurers from time to time (HIAIS Panel). A current list of the HIAIS Panel may be provided to the applicant on request.
2. If any of the information disclosed in this application alters or materially changes, I/we will notify HIAIS immediately.
3. I/we acknowledge that if our application for home warranty insurance is accepted by the Insurer, it is the initial and successive home owners who are eligible to purchase individual job specific policies as beneficiaries and not I/we as the applicant/builder. The Insurer reserves the right to revoke this eligibility at any time in accordance with the Insurer's policies and procedures. For more information, you should refer to the relevant Insurer.
4. HIAIS reserves the right to reject any application for insurance and seek additional information from the applicant as required from time to time.
5. I/we believe that the applicant is currently solvent and in its capacity can meet all of its financial obligations as and when they fall due.
6. I/we have read and understood the Privacy Statement outlined in this application.
7. I/we authorise HIAIS to give to, or obtain from, other insurers or insurance reference bureaus, credit reporting agencies, suppliers, subcontractors and government departments any information about this insurance including this completed application and my/our insurance claims history and my/our credit history.
8. HIAIS Panel may rely and seek the benefit of the declarations contained in this Section 7.
9. I/we declare that all information given in this application and any attachments is true and correct.

Declared by (name of Owner/Director)

Signature

For and on behalf of

Date

Declared by (name of Owner/Director)

Signature

For and on behalf of

Date

Section 7 – Privacy Statement

You acknowledge that in order to provide insurance services to you (including evaluating your application; evaluating any request for a change to any insurance requirements; and providing, administering and managing the insurance services following acceptance of your application by any Insurer) (Purpose) we may from time to time collect personal information from you.

In this context, "Personal Information" has the meaning given to it in the Privacy Act 1988(Cth), the National Privacy Principles contained in Schedule 3 to the Act and any regulations, ancillary rules, guidelines, orders, directions, directives or other instrument made or issued under thereunder (Privacy Requirements).

You consent to our collection, use or disclosure of Personal Information for the Purpose. This may involve disclosing your Personal Information to our related bodies corporate, our and your agents and insurers.

We must provide you with access to your Personal Information held by us in accordance with the Privacy Requirements and our Privacy Policy. You may view our Privacy Policy at www.aon.com.au.

You acknowledge that we rely on your representation that you will provide notice and obtain all consents from any individuals that wish to access our services in connection with you (e.g. agents, directors) to allow us to collect Personal Information pursuant to this section.

Payment Details for Home Warranty Insurance Application

A fee of \$195 (including G.S.T.), representing services provided by HIA Insurance Services Pty Ltd, is payable on submission of this application form. Paying by cheque: please make payable to HIA Insurance Services. Paying by Credit Card: Please enter your credit card details in the section below, We accept MasterCard and Visa cards only.

Credit Card Type Mastercard Visa

Card Number

Card Exp Date (MM/YY)

Name on Card

Signature