



Builders Warranty Insurance

Western Australia - Job Specific Policy

PAYMENT DETAILS FOR JOB SPECIFIC POLICY INSURANCE

This application form is to be used where a policy is required for a single dwelling contract, or up to a maximum three dwellings on the one site.

| The following information/documentation must accompany this application: |
|--|
| Extract of building contract that details the names of the contracting parties, date of the contract, contract price, name of builder and ACN/ABN of builder must exactly match details in Section 1 of this application. If not, a policy cannot be issued. |
| ⚠ The name of builder and ACN/ABN on contract must exactly match details in Section 1 of this application form. If not, please contact your servicer. |
| ` |

| A premium 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. | | | | | | | |
| Credit card transactions will incur a surcharge, to view the current card payment/interchange fees please visit the following: aon.com.au/australia/terms_of_business.jsp. | | | | | | | |
| Credit Card Type Mastercard Visa AMEX I authorise the fee / premium of to be deducted from my nominated credit card. | | | | | | | |
| Card Number Card Expiry (mm/yyyy) | | | | | | | |
| Name on Card Signature Date (dd/mm/yyyy) | | | | | | | |
| | | | | | | | |
| To the extent permitted by law, we may correspond with you by electronic communication unless you instruct us not to do so (and vice versa). Electronic communications, such as emailed cred | | | | | | | |

PRIVACY STATEMENT

HIA Insurance Services Pty Ltd ('HIAIS') is committed to protecting your personal information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). We collect, use and disclose personal information to offer promote, provide, manage and administer the many financial services and products we and our group of companies are involved in, as set out in the <u>HIAIS Privacy Notice</u>. Unless we hear from you otherwise, through the means set out in the <u>HIAIS Privacy Notice</u>, we will assume that you have read the <u>HIAIS Privacy Notice</u> and you have no objection to us handing your personal information in the manner set out in this notice (which includes contacting you to promote our products and services we think may be of interest to you).

A copy of the <u>HIAIS Privacy Notice</u> can be located on our website www.hiainsurance.com.au

card information are not always secure and they may be read, copied or interfered with in transit. We are not responsible for any of the risks associated with electronic communication.

LODGEMENT DETAILS - Please ensure this application is lodged per the below options.

Applications sent to QBE directly will be subject to delay. If you have any queries, please call HIA Insurance on the below details.

Address: PO Box 1494, Osborne Park WA 6916 Email: au.wa.warranty@aon.com
Phone Number: 1300 800 801 Website: www.hiainsurance.com.au

1062022

Builders Warranty Insurance Job Specific Application

QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239 545



This application form is to be used where a policy is required for a single dwelling contract, or up to a maximum three dwellings on the one site. Important note:

The following information/documentation must accompany this application:

Extract of building contract that details the names of the contracting parties, signed date of the contract, contract price, legal entity name and ACN/ABN of the builder must exactly match details in Section 1 of this application. If not, a policy cannot be issued.

| Section 1 - Builders' details | | | | | | | | | | | |
|---|---------------|---|-----|-------------------------|-------------------------|---------------------------|--|--------|--------|---|----|
| QBE policy number | | | | | Licence no. (applicant) | | | | | | |
| ACN | | | | | ABN | | | | | | |
| Legal name of the building entity (applicant) | | | | | | | | | | | |
| Office address | | | | | | State | | Postco | ode | | |
| Telephone | | | | | Mobile | | | | | | |
| Email address | | | | | Fax | | | | | | |
| Section 2 - Contract details | | | | | | | | | | | |
| Note: Contract price must include G | SST | | | | | | | | | | |
| Signed contract date Est | | Estimated start date | | | | Estimated completion date | | | | | |
| | | | | | | | | | | | |
| Standard fixed price contract | | | or | Cost plus contract: bud | | dget | | | Margin | | or |
| \$ | | | Oi | \$ | | | | | | % | |
| Project management budget | Managemen | agement fee Speculative development: budget | | | | Margin | | | | | |
| \$ | \$ | | OI. | \$ | | | | | | % | |
| Is this an architect/designer tender | ed project? Y | es No | | | | | | | | | |
| If yes, please supply details | | | | | | | | | | | |
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| New single dwelling | Contract | Speculative | | |
|--|----------------------|-------------|--|--|
| | Display Homes | | | |
| | Kit Homes | | | |
| Alteration & addition structural | Contract | Speculative | | |
| | Carports/garage | Landscaping | | |
| | Structural extension | Other | | |
| | Kitchens | | | |
| | Bathrooms | | | |
| Multi-unit dwelling | Contract | Speculative | | |
| | Two | Three | | |
| Swimming pool | Contract | Speculative | | |
| Please provide a brief description of the work | | | | |

| Section 4 - Site location details | | | | | | | | | |
|-----------------------------------|--|-------------|--|------------|--|--|----------|--|--|
| Street number | | Unit number | | Lot number | | | | | |
| Street name | | | | | | | | | |
| Suburb/town | | | | State | | | Postcode | | |

| Section 5 - Permit authority/council | | | | |
|--------------------------------------|---|-------|----------|--|
| Name | | | | |
| Postal address | | | | |
| | S | State | Postcode | |

| Section 6 - Interested party (homeow | ner) | | | | | | | | |
|--|----------------------------------|-------------|------------|------------|----------|--------------------|-------------|--------|------|
| Full name | | | | | | | | | |
| Postal address | | | | | | | | | |
| Note - This is not the site address | | | | | State | | Postcode | | |
| Phone number | | | | | Mobile r | number | | | |
| Email address | | | | | | | | | |
| | A copy of the Certificate of ins | surance wil | l be email | ed to this | address | | | | |
| Is the home owner entitled to claim an Input Ta | ax Credit on the Premium? | Yes | No | If so, h | now muc | h - 100% or other? | | | % |
| ABN (if applicable) | | | | | | | | | |
| Is there any type of existing relationship between | en the builder and the hom | ne owner? | Yes | No |) | | | | |
| If yes, please provide full details of any related | party interests e.g. family n | nembers, | joint ven | ture/lan | d owner | ship, common direc | tors/shareh | olders | etc. |
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Section 7 - Your duty of disclosure

The information you provide in this application is relevant to QBE's decision as to whether to offer future Builders Warranty Insurance.

Your duty of disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- · reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both. If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Section 8 - Privacy

QBE's Privacy Policy describes how we collect, disclose, store and use your information and how you can access it, correct it or contact us to make a complaint. QBE may share your information with other QBE Group companies or with our authorised representatives and service providers, each of which may be based outside of Australia. You can view our Privacy Policy at www.qbe.com.au/privacy, or to obtain a copy of it you can phone us on 133 723 or request it from one of our authorised representatives or service providers.

By providing the information we've requested, you consent to QBE collecting, using and storing your information to issue, administer and manage the products and services you have or may wish to take with us in accordance with our Privacy Policy. If you've provided information about any other person, by submitting this form you confirm that you've let them know that you're providing their information and that you've obtained their consent to do so.

If you don't provide all of the information we've requested, we may be unable to issue you with a product or service or we may be unable to administer or manage it.

Section 9 - Builder declaration and acknowledgment

I/We declare and acknowledge that:

- The Insurer QBE has the right to decline any Builders Warranty Insurance application.
- The Insurer QBE or its Agents reserve the right at all times to seek additional information from the builder and all other parties to this application.
- The details as provided in this application are true and correct.
- · I/We have not been refused or declined Builders Warranty Insurance or any other form of construction insurance in the past.
- I/We authorise QBE and its related entities, to collect or disclose any personal information to any other Builders Warranty Insurers, Insurance
 Reference Services or relevant Statutory Authorities and that where I/we have provided information about another person as in the case of
 a building owner or employee that this person has been or will be made aware of this.
- I/We acknowledge that QBE reserves the right to apply an additional premium in the event of a 20% or greater variation to the original contract price.
- I/We declare that as at the date of signing this application that I/we are solvent.
- I/we agree this document can be filled in, signed and sent electronically.

| Declared by (Name) | Signature (if online, type in your signature) |
|----------------------|---|
| Position/Title | |
| | |
| For and on behalf of | Date (dd/mm/yyyy) |
| | |