

HBCF Project application form - All work excluding multiple dwelling projects

- Use this form for projects involving single dwelling: new construction, alterations/additions and non-structural renovations.
- Use this form for a new single dwelling with an additional seondary dwelling (granny flat).
- Use this form for non-strata duplex, dual occupancy, triplex and/or terrace (attached) construction.
- **Do not use this form** for new duplex, dual occupancy, triplex and/or terrace (attached) construction that will be strata/community titled. Use the multi-dwelling project application form instead.
- Do not use this form for multiple dwelling projects
- Use this form for swimming pools
- Please submit this application to your nominated distributor who can provide assistance in completing the form
- References in this form to builder and building work include trade and other building contractors/work.
- Fields marked with an * need to be completed.

HBCF recommends using the most recent version of Adobe Acrobat when viewing or completing this form. You can complete this form online, contact your broker for details.

1. Builder details

Builder's name (i.e. the legal name under which you contract and as shown on your builder's licence)*		
ABN*	Licence number*	Licence expiry date (DD/MM/YYYY)*
Registered business name		
Business address (not PO Bo	x address)*	
Suburb/town*		State* Postcode*
Telephone	Mobile	Email (this is the preferred form of contact)
Is this Project Application Yes No If Yes enter claim number	arising from a HBCF claim?*	
Does your builder's licence Yes No	cover all work being contracted a	nd included in this application?*

Visit NSW Fair Trading's website at <u>www.fairtrading.nsw.gov.au</u> to check whether the licence category shown on your licence covers the type of work being contracted. If you are not properly licensed for the work being contracted, or the licence is not current, HBCF insurance cover is unable to be issued.

Construction type* (select only one of the	e below construction types from A to E. This sh	ould match	the one selected on pages 4 to 7).
A - New single dwelling consti	ruction		
B - Single dwelling alterations,	additions - structural		
C - Single dwelling renovation	s – non-structural		
	cy, triplex and/or terrace (attached) of the selling with a granny flat/secondary dv		iion
E - Swimming pools			
2. Owner/developer deta	ails (as per contract)		
Please do not enter Builder details.			
Owner/developer (name in full)*			
ABN Registered business name			
Registered business name			
Address type* Billing Home Bu Address*	siness Other		
Suburb/town*		State*	Postcode*
Telephone	Mobile		
Owner/developer primary email add	ress*		
Yes No	ests: nership Common director	ationship	

3. Site address

House no.*	House no. suffix	Unit no.	Address	site name (e.	g. proper	ty/estate)		
Building name		Street na	ame/type*					
Suburb/town*				Sta	ate*	Postcod	e*	
If house number	not known, comple	te the following*						
Lot number*	Plan type* (deposit	_	registered)	Pla	an num	ber*	Section numbe	r
4. Contract	details							
Builder's project	number		Estimate	ed start date	(DD/MM,	/YYYY)*		
Estimated compl	etion date (DD/MM/Y	′YYY)*	Date cor	ntract signed	(actual/	proposed)	(DD/MM/YYYY)*	
Speculative builder marg	type* development including land value entract: Budget incl	ding e)	Builder's	s percentage	margir	1	%	
Project management construction cost budget			Manager	ment fee \$				
\$ Is this an architec	f separate contract price							
If yes, name of ar	rchitect/designer*	Telephone*		Bu	ilder's	percenta	age margin*	
							'	%
	ms of work to be co	ompleted or suppl	lied by the	owner?*				
If yes please prov supplied by the o	vide details of the w wner*	vork to be comple	ted or				e of the work to by the owner*	
				\$				

6. Construction description*

Please provide a description of tappear on the Certificate of Insurance)	he building work to be undertaken* (Descri	ption of building work to be undertaken will
Number of storeys*	Living area (sqM)	Garage/carport/verandah (SqM)
7. Funding and progre	ess payment details*	
How will the project be funded?		
Progress payment by owne	r Progress payment by constructi	on finance lender
Settlement on completion	Other (provide details)	
— Are your progress payments cor	nsistent with your Industry Association's g	uidelines?*
Yes No		
f no please provide details*		
I/we do not belong to an In	dustry Association	
My Industry Association do	es not have any guidelines on progress pa	ayments
Other (provide advise)		
	duled progress payments do not exceed th	ne value of work performed and the
materials supplied under the cor		to value of work portormica and the
Yes No		
f no please provide details*		
9 Construction type		·
8. Construction type		
Select only one of the below cor page 2.	nstruction types (A-E). This must match th	ne construction type selected on
Juge 2.		
A – New single dwelling con	struction	
Addition/new - Granny flat*	Basement/underground parking*	Attic*
Yes No	Yes No	Yes No
Garage*	Carport*	Swimming pool*
Yes No	Yes No	Yes No
nternal floor covering*	Transportable house*	Kit home - Erect/construct*
Yes No	Yes No	Yes No
Landscaping	Kit home - Supply and erect/constru	ct*
Yes No	Yes No	

Base type*		
Bearers and joists	Concrete slab on grou	nd
Concrete slab on strip footings	Pole construction	
Steel framed high set	Other	
Wall construction type*		
Brick/block veneer	Solid masonry	
Timber boards/weatherboards	Other	
Site fall across the building envelope ^{1*} (r	netres)	
¹ Site fall across the building envelope - the boundary to the lowest point on the envelope		
Services:		
Air conditioning* Central heat	ng* Solar panels*	Elevator/escalator etc*
Yes No Yes	No Yes N	o Yes No
B - Single dwelling alterations/add Addition - New storey* Addition - N Yes No		Addition - New bedroom*(insert number)
Addition - New carport* Addition - N	ew garage* Addition - New kit	tchen* Addition – New laundry*
Yes No Yes	No Yes N	o Yes No
Addition - New living room* (insert number	Addition - New screened e	nclosure, verandah, porch, deck etc*
	Yes No	
Addition - New shed* Addition - O	ther	
Yes No		
Alterations - Attic conversion* Alte	erations - Basement conversion*	Alterations - Existing bathroom/WC*
Yes No	Yes No	Yes No
Alterations - Existing bedroom* Alte	erations - Existing carport*	Alterations - Existing garage*
Yes No	Yes No	Yes No
Alterations - Existing granny flat*	erations - Existing kitchen	Alterations - Existing laundry*
Yes No	Yes No	Yes No
Alterations - Existing screened		Alterations - House
enclosure, verandah, porch, deck etc* Alto		lifting/restumping*
Yes No	Yes No	Yes No
Alterations - Underpinning/piering* Wa		Waterproofing - External*
Yes No	Yes No	Yes No
	veway/paving*	Fire protection services installation*
Yes No	Yes No	Yes No

Retaining wall*	Structural landscaping* Alteration	ons - Other
Yes No	Yes No	
C - Single dwelling renovations	- non structural	
Bathroom renovation*	Kitchen renovation*	Laundry renovation*
Yes No	Yes No	Yes No
Prefabricated patios*	Prefabricated carports*	Prefabricated garages*
Yes No	Yes No	Yes No
Prefabricated sheds*	Fencing*	Solar panel installation*
Yes No	Yes No	Yes No
Minor swimming pool repairs*	Driveway/paving*	Pergolas*
Yes No	Yes No	Yes No
Replacement of roof coverings*	Timber decks*	
Yes No	Yes No	
Trade work involving:		
Bricklaying/stonemasonry*	Carpentry/joinery*	General concreting*
Yes No	Yes No	Yes No
Glazing*	Painting and decorating*	Roof plumbing (including metal roofing)*
Yes No	Yes No	Yes No
Roof slating/tiling*	Wall and floor tiling*	Plastering - Dry*
Yes No	Yes No	Yes No
Plastering - Wet*	Plumbing/draining*	Gasfitting*
Yes No	Yes No	Yes No
Electrical wiring/repairs*	Air conditioning/heating*	
Yes No	Yes No	
Other		
and/or terrace (attached) co		nny flat), dual occupancy, triplex
	f these construction types will be	strata/community titled, use
the multi dwelling project ap		
Is separate price/value per dwelling	required?* Total number of c	dwellings in project
Yes No		
Please indicate price for each dwelling	ng (please complete if separate price/value pe	r dwelling required)
House no.s		
\$		
\$		
\$		

Shared structural elements and se	ervices:		
Common walls*	Common roofir	ng*	Common driveway/parking area*
Yes No	Yes	No	Yes No
Shared garage/carport*	Shared air cond	litioning system*	Shared central heating system*
Yes No	Yes	No	Yes No
Solar panels*	Basement/unde	erground parking*	Other
Yes No	Yes	No	
Base type*			
Bearers and joists		Concrete slab on grou	ind
Concrete slab on strip footings	F	Pole construction	
Steel framed high set		Other	
Wall construction type*			
Brick/block veneer	S	solid masonry	
Timber boards/weatherboards		Other	
Site fall across the building envelope	e ^{1*} (metres)		
¹ Site fall across the building envelope boundary to the lowest point on the			om the highest point on the envelope e area occupied by the building.
Individual dwelling features (non-	shared):		
Garage* Attic*	·	Carport*	Internal floor covering*
Yes No Yes	No	Yes N	lo Yes No
Swimming pool* Landsca	ping*		
Yes No Yes	No		
Individual dwelling services (non-	shared)		
Air conditioning* Central h	neating*	Solar panels*	Elevator/escalator etc*
Yes No Yes	No	Yes	lo Yes No
E - Swimming Pools			
New inground concrete*	New inground to	fibreglass*	New inground vinyl lined*
Yes No	Yes	No	Yes No
New inground - Other	New above gro	und*	New internal pool (inside dwelling)*
	Yes	No	Yes No
Alterations/repairs to existing pool*	New spa*		
Yes No	Yes	No	

9. Privacy statement

NSW Self Insurance Corporation (SICorp) is a statutory corporation constituted under the *NSW Self Insurance Corporation Act 2004* (NSW) and is responsible for carrying on the business of providing insurance under the Home Building Compensation Fund (HBCF Insurance) for residential building work done in New South Wales which requires such insurance under the *Home Building Act 1989*. Insurance and Care NSW (**icare**) provides the services and facilities of the SICorp under the *State Insurance and Care Governance Act 2015*. For the purposes of this Privacy Statement, SICorp and icare together are **icare hbcf**.

icare hbcf is regulated by the *Privacy and Personal Information Protection Act 1998* and is required to provide the following information to you in relation to your personal information.

Purpose of collection

icare hbcf, through its agents, contractors and associated entities, collects and holds personal information (information or an opinion about an individual whose identity is apparent or can reasonably be ascertained from the information or opinion and which relates to a natural living person) for the purpose of providing HBCF, including (without limitation):

- evaluating your application;
- managing the risks associated with HBCF Insurance;
- providing, administering and managing insurance related services following acceptance of an application; and
- investigating, managing and processing claims made under the HBCF Insurance.

icare hbcf and its agents, collect and hold personal information in connection with the purposes listed above, through this application and also from other State or Federal government bodies, your intermediary, insurance agents, loss assessors, claims investigators, reinsurers, insurance companies, mailing houses, claims reference providers, trade credit reference sources, financial assessors, other service providers, legal and other professional advisers or any other third party with relevant information.

Examples of personal information collected include (without limitation):

- your insurance claim history;
- · your credit history;
- your financial status and history;
- · your corporate history; and
- your personal and professional relationships;
- any other information about you, directly or indirectly relevant to the risk management undertaken by icare hbcf.

Disclosure

icare hbcf or its agents may disclose your personal information in connection with the purposes listed above or as otherwise authorised or required by law, to other State or Federal government bodies, your intermediary, our insurance agents, loss assessors, claims investigators, reinsurers, insurance companies, mailing houses, claims reference providers, trade credit reference sources, financial assessors, other service providers, legal and other professional advisers.

Consequences if information is not provided

Supply of the information sought in this form is not required by law, however, if you do not provide us with this information we will be unable to consider applications for eligibility or any policy, or to deal with any claim under the HBCF Insurance. If the information is not provided, **icare hbcf** reserves the right to refuse to deal with any application or request until the requested information is provided.

Access

You can request access to, and correction of, your personal information by contacting the Privacy Contact Officer of your insurance agent, through whom you or your distributor have sought insurance, and to whom your information has been provided as our agent.

In some circumstances we may not agree to allow you access to some or all of the personal information we hold about you such as when it is unlawful to give it to you. In such cases we will give you reasons for our decision.

icare hbcf, GPO Box 4052, Sydney NSW 2001

This address is provided in accordance with the Privacy and *Personal Information Protection Act* 1998. **Do not** send this form to the above address - lodge the form with your Insurance Distributor.

10. Builder declaration

This declaration is made on behalf of the builder by someone who has authority to do so (noting that a false or incorrect declaration may have serious repercussions for the builder):

I/We declare that I/we have provided all information required on the project for which HBCF Insurance is sought and details of the owners involved.

I/We acknowledge that I/we or the builder may be liable to **icare hbcf** for inadequate, misleading or false information provided in the course of this application.

I/We confirm that the details on this application form are true and represent a fair and accurate representation of the affairs of the applicant(s). If any of the information disclosed in this application alters or materially changes, I/we undertake to notify our broker immediately.

I/We believe that the applicant is currently solvent and can meet all of its financial obligations as and when they fall due.

I/We acknowledge that **icare hbcf**, or its agent, may seek additional information from me/us, our intermediary or any third party as required from time to time.

I/We acknowledge that **icare hbcf**, or its agent, reserves, absolutely, the right to reject this application.

I/We acknowledge that if our application for insurance is accepted by **icare hbcf**, or its agent on **icare hbcf's** behalf, it is the initial and successive homeowners who are the beneficiaries and not I/we as the applicant/builder.

I/We have read and understood the Privacy Statement section in this application.

Consents

For personal applicants

I consent to **icare hbcf** and its agents collecting, using and disclosing my personal information in accordance with the Privacy Statement and in any way it reasonably considers necessary or appropriate for the purpose of meeting its statutory and contractual obligations.

For all applicants

If I have disclosed personal information in this form about any other person, I confirm that I am authorised to disclose this information to **icare hbcf** and its agents and to consent (and do consent) on that person's behalf to collection, use and disclosure of this and other personal information about them in accordance with the Privacy Statement and in any way it reasonably considers necessary or appropriate for the purpose of meeting its statutory and contractual obligations.

Declared by Authorised Officer 1*		Declared by Authorised Officer 2		
Signature	Date (DD/MM/YYYY)	Signature	Date (DD/MM/YYYY)	
Capacity/Position		Capacity/Position		

Note: Section 103EA of the *Home Building Act 1989* (NSW) provides that it is an offence for a person, in connection with an application to an insurer for cover, to make a statement (whether orally, in a document or in any other way) knowing that, or being reckless as to whether, the statement is false or misleading or omitting any matter or thing without which the statement is misleading in a material particular. Such an offence may be punishable by a penalty of up to \$22,000.

Section 9 - Payment Method
▶ Paying by Credit Card: Master Card Visa Paying by EFT
 We accept Master and Visa cards only. Payment is subject to 1% surcharge Please enter your credit card details in the section below. Ensure you pay the total amount including the credit card surcharge as per your premium chart. Please forward the completed application form to The Builders Insurance Brokers:
Email: warranty@buildersbroker.com.au; Fax 02 9579 6680 or Mail: PO Box 12 Penshurst NSW 2222 Amount Card Number - Payment subject to 1% surcharge CCV No Expiry Date \$ 0.00
Paying by Cheque: Please ensure your cheque payment is made payable to your nominated Broker and is attached to your Application Form.
Paying by EFT - Please forward your EFT receipt to our office when payment is made. St George Bank - BSB: 332 027 - Account Number 100182841