

Application Form

HBCF Project application - All work excluding residential apartment building projects

Use this form for:

- projects involving a single dwelling, including new construction and other building work.
- a new single dwelling with an additional secondary dwelling (granny flat).
- duplex, dual occupancy, triplex and/or terrace (attached) construction.
- swimming pools.

Do not use this form for residential apartment building projects.

Please submit this application form to your nominated distributor to help you to complete it.

- References in this form to Builder and building work include trade and other building contractors/work.
- You must complete all field marked with an asterisk (*).
- You can also complete this form online in the Builder Self Service Portal (BSSP). Contact your broker for details.

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

ABN*	Licence	number*	Licence exp	iry date (DD/MM/YYYY)
Registered business	s name	Business	address (not PO Box ad	ddress)*
Suburb/town*			State*	Postcode*
Telephone	Mobile	Email* <i>(ti</i>	his is the preferred form o	of contact)
	cation arising from an HE Io m number	BCF claim?*		



Does your builder's licence Yes No	e cover all work being cont	racted and included in th	is application	on?*
on your licence covers the	rebsite at <u>www.fairtrading.ns</u> type of work being contract is not current, we cannot issu	ted. If you are not properly		
Construction type* (select of Section 8. Construction Type).	only one of the below construct	ion types from A to C. This s	hould match i	the one you select in
A - New dwelling co	nstruction (includes single	and multi-dwelling)		
Will this dwelling Yes	be part of a strata or com No	munity title developmen	t?	
B - Building work to	an existing dwelling (includ	des single and multi-dwe	lling)	
C - Swimming pools				
	ruction may include the follo e, villa unit etc., including any			
2. Owner/developer of Please do not enter builde Owner/developer (name in 1		*		
Registered business name			ABN*	
Address type* Billing Ho Address*	me Business	Other		
Suburb/town*		State	*	Postcode*
T. I.			•1	
Telephone	Mobile*	Owner/developer prima	iry email ad	uress
ls it a speculative project?	Ca project that the builder	ion out for themselves as Iss	d that than =:	·/n*
Is it a speculative project? Yes No	(a project that the builder carr	es out for themseives on lan	u tnat tney ov	vny*



Is the owner of the land the contracting party?*			
Yes No			
Please provide full details of the owner of the land			
Is there any relationship (other than family) between	the owner/develop	er and the Builde	r?
Yes No			
Please select the related party interests:			
Joint ventures Common director	Land owner	ship	nareholders
3. Site address			
House no.* House no. suffix Unit no.	Address site nam	e (e.g. property/esta	ate)
Building name	Street name/type	*	
Suburb/town*		State*	Postcode*
If you don't know the house number, complete the fo			
Lot number* Plan type* (deposited plan, strata plan,	unregistered)	Plan number*	Section number
4. Contract details			
Builder's project number	Estimated start d	ate (DD/MM/YYYY)	*
Estimated completion date (DD/MM/YYYY)*	Date contract signed (DD/MM/YYYY)*		
5. Contract details (signed and dated contra	ct must be subn	nitted with this	form)
Standard fixed price/lump sum contract			
Speculative development including builder margin (excluding land value)			
Cost plus contract: Budget including margin	Builder's percer	tage margin	
Project management construction cost budget	Management fe	е	
Contract price (incl GST)* (if separate contract price required New (Multi-) Dwelling construction)	red for a duplex etc, p	lease indicate amou	nts in section A 2 -
LIDOE			
HBCF premium allowance (incl.GST) (if included in the contract price)	Net contract price (incl GST & excl. HBCF premium allowance)*		
. ,		<u> </u>	



Is this an architect-tendered project	and/or will it be man	aged by an archite	ct/designer?*	
Yes No				
If yes, name of architect/designer*	Telephone*		Builder's percentage margin*	
Are there any items of work to be converted by Yes No If yes please provide details of the way completed or supplied by the owner.	vork to be Pro		d value of the work to be d by the owner*	
6. Construction description* Please provide a description of the kundertaken will appear on the Certificate	ouilding work to be ui of Insurance). Max 133 cl	ndertaken* (Descrip naracters	tion of building work to be	
Number of storeys*	Living area (square me	tres) Garage/carp	oort/verandah (square metres)*	
7. Funding and progress payn How will the project be funded? Progress payment by owner	nent details* Settlement on o	completion		
Progress payment by a construction finance lender Other (provide details)				
Are your progress payments consist Yes No	ent with your Industr	y Association's gui	delines?*	
If no please provide details*				
I/we do not belong to an Indus	stry Association			
My Industry Association does	not have any guidelin	es on progress pay	rments	
Other (provide advise)				
Can you confirm that your schedule the materials supplied under the confirm Yes No If no please provide details*		do not exceed the	value of work performed and	



8. Construction type

Select only one of the construction types below (A-C). This must match the construction type you selected at the end of Section 1, in Construction Types.

A 1 - New (single) dwelling construction (Construction Type H01)

Type of dwelling Detached Kit home -Kit home - Supply and erect/construct* house* Erect/construct* Yes No Yes No No Yes Secondary dwelling Semi-detached house, Terrace or townhouse* (for example, Granny flat)* duplex or triplex* Yes No Yes No Yes No Transportable house* Villa home* Yes No Yes No Comprising Basement/underground Attic* Carport* parking* Yes No No No Yes Yes Garage* Internal floor coverings* Landscaping³ Yes No Yes No Yes No Swimming pool³ No Yes Base type* Bearers and joists Concrete slab on strip footings Pole constructions Concrete slab on ground Other Steel framed high set Wall construction type* Timber boards/weatherboards Brick/block veneer Solid masonry Other Site fall across the building envelope^{1*} (metres) Site fall across the building envelope - this refers to the difference in level from the highest point on the envelope boundary to the lowest point on the envelope boundary. The envelope is the area occupied by the building. Services: Elevator/escalator etc* Air conditioning* Central heating* Solar panels* Yes No No No No Yes Yes Yes



A 2 - New (Multi-) Dwelling construction

Note: Multi-dwelling construction may include the following: duplex, triplex, semi-detached house, row house, terrace house, town house, villa unit, etc., including any associated structures (for example, a swimming pool, garage, shed).

Attached dwellings with common space below, e.g. Duplex, triplex etc, must be processed as construction type H03. Refer Australian National Construction Code

Is separate price/value per dwelling required?*	Total number of dwellings in project
Yes No	
Please indicate price for each dwelling (please complete House numbers	e if separate price/value per dwelling required)
Number of dwellings that are:	No.
One bedroom	
Two bedrooms	
Three bedrooms	
Four bedrooms	
Other	
Total number of dwellings	
No of storeys*	



Snared structural elements	and services:*			
Basement/underground parking*	Yes	No	Common driveway/ parking area*	Yes No
Common roofing*	Yes	No	Common walls*	Yes No
Community facilities/buildin rooms, etc.)*	gs (for example	, gymnasi	um, meeting/dining	Yes No
Elevator/escalator, etc.*	Yes	No	Shared access roads*	Yes No
Shared air conditioning system*	Yes	No	Shared central heating system*	Yes No
Shared easements (for example, for services)*	Yes	No	Shared garage/carport*	Yes No
Solar panels*	Yes	No	Other mechanical services*	Yes No
Other				
Base type*				
Bearers and joists*	Yes	No	Concrete slab on ground*	Yes No
Concrete slab on strip footings*	Yes	No	Pole construction*	Yes No
Steel framed high set*	Yes	No	Other*	
Wall construction type*				
Brick/block veneer*	Yes	No	Solid masonry*	Yes No
Timber boards/ weatherboards*	Yes	No	Other*	
Site fall across the building e	envelope¹* <i>(metre</i>	es)		
Site fall across the building enve lowest point on the envelope bo	•		ee in level from the highest point on the occupied by the building.	ne envelope boundary to the
Individual dwelling features	(non-shared):			
Garage covering*	Attic*	7	Carport*	Internal floor*
Yes No	Yes	No	Yes No	Yes No
Swimming pool*	Landscaping*			
Yes No	Yes	No		
Individual dwelling services	(non-shared):			
Air conditioning*	Central heating	*	Solar panels*	Elevator/escalator etc*
Yes No	Yes	No	Yes No	Yes No



B - Building Work to an Existing Dwelling (Construction type H04) Is the dwelling part of a strata or community title scheme?* Yes No Does the project involve work to the common property of the strata or community title scheme?* No Total number of dwellings in the strata or community title scheme. **New Additions** New balcony, verandah, New storev Yes No Yes No patio, porch, deck etc. New bathroom / WC New bedroom (insert No No Yes Yes (insert number) number) New carport No New garage No Yes Yes New kitchen Yes No New laundry Yes No No New living room Yes No New pergola Yes New screened enclosure Yes No New solar panels Yes No New shed Yes No Other* Work to existing rooms / structures / features / components etc. Balcony, verandah, patio, Attic conversion* Yes Yes No No porch, deck etc.* Balustrades* No No Basement conversion* Yes Yes Bathroom/WC* Yes No Bedroom* Yes No Carport* No Cladding* No Yes Yes Driveway/paving* No Fencing (masonry)* Yes No Yes Fencing (other than Fire protection services Yes No Yes No masonry)* installation* House lifting/restumping* No Garage* Yes No Yes Kitchen* Yes No Laundry* Yes No Pergola* No Retaining wall* No Yes Yes Roofing* Yes No Screened enclosure* Yes No Shed* Yes No Solar panels* Yes No Landscaping (structural)* Yes No Waterproofing - external* Yes No Waterproofing - internal* Yes Underpinning/piering* Yes No No

Other



Single trade work projects in	volving				
Air conditioning/central heating*	Yes	No	Bricklaying.*	Yes	No
Carpentry*	Yes	No	Draining*	Yes	No
Electrical wiring/repairs*	Yes	No	Gasfitting*	Yes	No
General concreting*	Yes	No	Glazing*	Yes	No
Joinery*	Yes	No	Painting and decorating*	Yes	No
Pastering - dry*	Yes	No	Plastering - wet*	Yes	No
Roof plumbing (including metal roofing)*	Yes	No	Roof slating/tiling*	Yes	No
Sanitary plumbing*	Yes	No	Stonemasonry*	Yes	No
Wall and floor tiling*	Yes	No	Water plumbing*	Yes	No
Other					
C - Swimming Pools (Construction type H05) Is this project a New Rooftop or Basement Swimming Pool in a Class 2 Building? Yes No					
building are not covered by t	he H05 Swimmin	ng Pools ca	nded to be located within a Class tegory. Use section B Building W sidential apartment building proj	ork on Resid	
Alterations/repairs to existing pool/spa*	Yes	No	New above ground*	Yes	No
New inground concrete*	Yes	No	New inground fibreglass*	Yes	No
New inground vinyl lined*	Yes	No	New inground other*		
New internal pool (inside dwelling)*	Yes	No	New spa*	Yes	No



9. Privacy statement

NSW Self Insurance Corporation (SICorp) is a statutory corporation constituted under the *NSW Self Insurance Corporation Act 2004* (NSW). It 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 (NSW)*. 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, administering, and managing 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
- 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, (for example, information provided by commercial credit searches conducted by commercial credit bureaus), and legal and other professional advisers or any other third party with relevant information.

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, including regulators, 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, and legal and other professional advisers.

Consequences if you don't provide information

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 icare Privacy team at Privacy@icare.nsw.gov.au.

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.

Note: If you are providing your digital signature or another person's digital signature, this is equally as binding as if it were a wet ink signature. If you are providing another person's digital signature, you may also be incurring legal responsibility in your own right (in addition to the person you are providing a digital signature for).

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 have provided those other persons with the Privacy Statement, and I am authorised to disclose their personal 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 (including the collection of their personal information from third parties) and in any way icare HBCF 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	1	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
Name of the card holder (as shown on the card) Signature
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