



# OWNER BUILDER WARRANTY PROPOSAL FORM

## IMPORTANT NOTICE

### OWNER-BUILDERS WARRANTY POLICY

The policy is established to meet the requirements of the current legislation. The policy, subject to its terms and conditions, provides cover **to the purchaser** of a property in respect of owner-builder work, for loss or damage during the Period of Insurance which results from breach of the implied warranties and other benefits as defined in the event of the death, disappearance or insolvency of the owner builder.

### NON-DISCLOSURE

It is vital that before you complete your proposal form and before you sign the declaration that there has been no change in the information disclosed. Please take notice of the following statement pursuant to provisions of the Insurance Contracts Act 1984.

### YOUR DUTY OF DISCLOSURE

Before you enter into a contract of general insurance with an Insurer, you have a duty under the Insurance Contracts Act 1984 to disclose to the Insurer every matter that you know, or could reasonably be expected to know is relevant to the Insurer's decisions whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of a matter:-

- that diminishes the risk to be undertaken by the Insurer;
- that is of common knowledge;
- that the Insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the Insurer.

(It should be noted that this duty continues after the proposal has been completed up until the policy is entered into, ie the date the Insurer receives your acceptance of the quote).

### SURRENDER OR WAIVER OF ANY RIGHT OF CONTRIBUTION OR INDEMNITY

Where another person or company would be liable to compensate you or hold you harmless for part or all of any loss or damage otherwise covered by the policy, you **MUST NOT** agree with that person either before or after the inception of the policy that you would not seek to recover any loss or damage from that person.

### PRIVACY ACT PROVISIONS

"I/We acknowledge that the personal information QBE Insurance Ltd. ("QBE") collects from me/us is collected for the purpose of processing this application, fulfilling QBE' obligations in providing services to me/us, for the development of products and services, and to allow the corporate group of which QBE forms a part to market products and services. If I/we do not provide relevant information, I/we acknowledge that QBE may be unable to process my/our application.

I acknowledge that information may be disclosed to:

- Intermediaries through which I/we deal with QBE (for instance and agent, broker or financial advisor)
- Claims assessment participants (for instance an assessor, investigator and/or loss adjuster)
- Other reputable service providers (for instance mailing houses) and
- Underwriters, who are responsible for part of the risk under a contract of insurance.

By signing this form, I/we consent to QBE collecting and using this information for these purposes. This is subject to my/our right to opt out of receiving various direct marketing material at any time. I/We acknowledge that I/we have rights to access my/our personal information held by QBE in accordance with the National Privacy Principles."



# OWNER BUILDERS WARRANTY PROPOSAL FORM

- Please answer every question fully. Attach separate sheets if necessary.
- Please read the Important Notice on the front page of this proposal. In particular your attention is drawn to your Duty of Disclosure.

## APPLICATION CHECKLIST - WHAT DO YOU NEED TO DO NOW

In order to arrange for this insurance to be issued, make sure that you have all the required documentation available & completed. Please indicate with a tick (✓) which information is attached to this application on the following checklist.

- Complete this Owner Builder Warranty Proposal.
- A Defects Inspection Report dated not more than 6 months from the Contract of Sale date. (This report must be undertaken by a Prescribed Inspection Practitioner in accordance with Building Act provisions. See separate list of preferred practitioners).
- A copy of your Building Licence. **(WA only)**
- A copy of the Department of Fair Trading Owner Builder Permit **(NSW only)**
- A copy of the issued Development Approval, Building Approval, Complying Development Consent and/or Construction Certificate. (as applicable) **(NSW only)**
- A copy of the issued Owner Builder Certificate of Consent. **(VIC only)**
- A copy of all relevant issued (Owner Builder) Building Permit/s. **(VIC only)**
- A copy of the issued Occupancy Permit, and/or other written evidence of the Certificate of Final Inspection approval.
- A copy of the Certificate of Title, showing current ownership and allotment details. Available at:  
VIC: [www.land.vic.gov.au](http://www.land.vic.gov.au) NSW: [www.lands.nsw.gov.au](http://www.lands.nsw.gov.au) WA: [www.landgate.wa.gov.au](http://www.landgate.wa.gov.au)
- A copy of any Plumbing, Electrical, Waterproofing and/or Termite Certificates, and any other Warranty Certificates obtained.
- A copy of the Floor Plan of works undertaken.
- Payment of the specified premium.
- NOTE: If the Domestic Building Work undertaken did not require a Building Permit to be issued, then a Statutory Declaration is required, nominating the exact scope of works undertaken and the actual commencement and completion dates for such works. **(VIC only)**
- Directors Declaration - required for Owner Builders that are Corporate Entities.
- Waterproofing Declaration - required if there are external waterproof decks located over the habitable areas.

## 1/ DETAILS OF OWNER BUILDER/S (your current address)

Owner Builders Name/s:.....(as listed on Title)

Company Name (if applicable).....

If Company, Director/s Name/s ..... ABN:.....

Residential Address:.....

..... Postcode:.....

Ph: ..... Mobile: ..... Email:.....

After settlement of the property - your proposed address, or if not known, contact person and their address:

..... Postcode:.....

Ph: ..... Mobile: ..... Email:.....

## 2/ LOCATION OF OWNER BUILDER WORK (the address of the property to be sold)

Flat / Unit No. .... Street No..... Lot No.:.....

Street / Road.....

Suburb / Town:..... Postcode:.....

Municipal District: .....



**3/ TYPE OF OWNER BUILDER WORK** (what did you do?)

Identify the type of work that you undertook as an Owner Builder

- |  |   |
|--|---|
| <input type="checkbox"/> Construction of a Dwelling                    | <input type="checkbox"/> Fit Out / Bathroom / Kitchen |
| <input type="checkbox"/> Construction of Dwelling Extension            | <input type="checkbox"/> Swimming Pool / Spa          |
| <input type="checkbox"/> Construction of Garage, Carport, Pergola etc. | <input type="checkbox"/> Other (eg Fencing)           |
| <input type="checkbox"/> Internal Renovation of a Dwelling             |   |

Provide a detailed description of Owner Builder work only (eg; construction of two storey dwelling with garage, etc).

.....  
 .....

Floor area of project: ..... Current Replacement Value of work \$ .....

**4/ DETAILS OF ALL PERSONS/CONTRACTORS WHO PERFORMED WORK** (if available)

(attach separate list if insufficient space):

Type of Work	Contractor Name & Address	Cost of work done
.....	.....	\$.....
.....	.....	\$.....
.....	.....	\$.....
.....	.....	\$.....
.....	.....	\$.....

Type and value of work undertaken personally by the owner-builder (including materials supplied)

..... \$.....

Total cost of the work \$.....

Replacement value of Work \$.....

(N.B. The replacement value selected should reflect the price a licensed builder would charge today to do all the work which is now being insured)

**5/ PAST HISTORY** Have you been:

- issued with an 'Owner-Builder' warranty certificate/s of cover within the last 5 years?  Yes  No
- refused an 'Owner-Builder' warranty certificate/s of cover for this property by another insurer, or any other property within the last 5 years?  Yes  No
- declared bankrupt, or been a director of any company placed into receivership or liquidation?  Yes  No

Have you or, to your knowledge, any other person involved with the work been:-

- refused registration by the Building Practitioners Board or had registration suspended or cancelled within the last five years?  Yes  No
- directed to repair/replace defective workmanship following a complaint by a Homeowner within the last three years, or have a claim currently outstanding?  Yes  No
- Is there any Relationship between the Owner Builder and the Purchaser?  Yes  No

If "Yes" to any question, please supply full details:

.....  
 .....



**6/ OWNER BUILDER DECLARATION**

I/We declare that the information contained in this proposal form is true and correct in every particular at the date on which this proposal is accepted. I/We also acknowledge that this proposal will be the basis of the contract of insurance between the insurers and myself / ourselves and that the insurance is issued in accordance with the legislation which provides that this insurance is issued for the benefit of a purchaser of the property and does NOT provide any cover whatsoever to me/us.

The applicant(s) will reimburse the insurer any monies that the insurer pays to the insured in settlement of a claim under the policy if the applicant(s) have: (a) not complied with any laws or regulations relating to the building work and/or (b) used second hand materials which were not declared to the prescribed building practitioner and if not so noted in the prescribed building practitioners report or in the contract of sale and/or (c) not carried out the works in a proper and workmanlike manner.

I/We agree to authorise QBE or any interested party to this contract to give or obtain from, any government department, credit reference bureau, bank, legal professional, conveyancer, real estate agent, or professional, private investigation services and all information as required for the purpose of locating myself/us in the future for all claims that occur during the duration of this contract.

Signed: ..... Date: .....

Position: .....  
(If corporate applicant, Partner, Principal or Director)

**PLEASE CHECK THAT ALL SECTIONS HAVE BEEN COMPLETED**

**7/ YOUR SOLICITOR'S/CONVEYANCER'S DETAILS**

Solicitor/Conveyancer Name:..... Contact Person:.....  
Ph: ..... Mobile: ..... Email:.....

**8/ OTHER IMPORTANT INFORMATION**

Make Cheque or Money Order Payments to: **Building Industry Solutions P/L**  
or pay electronically or at any NAB branch directly into the following account:

**National Australia Bank Account Name: Building Industry Solutions BSB No. 083 253 Account No. 48813 2970**

**CREDIT CARD AUTHORITY**

Please Note: Extra Charges will apply: **\$0 - \$1,000 - \$11.00 \$1,001 - \$2,000 = \$22.00 \$2,001 - \$3,000 = \$33.00**

Card Holder Name: .....

Card No:                      Expiry Date: \_\_\_\_/\_\_\_\_

Signature ..... Premium Amount \$ \_\_\_\_\_  
Extra Charge \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_

Building Industry Solutions Pty. Ltd. is acting as an Agent for the Insurer, not as an Agent for the Insured or Applicant (Owner Builder) in effecting the contract of insurance.

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