

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 leg	gal name under which you contract and as show	n on your builder's licence)*
ABN*	Licence number*	Licence expiry date (DD/MM/YYYY)*
Registered business na	me	
Business address (not PC) Boy address)*	
Dusiness address (not re	o box addi ess)	
Suburb/town*		State* Postcode*
Telephone	Mobile	Email (this is the preferred form of contact)
Lathia Basis at Assalis at	LIDOT ALIVAY	
Yes No	on arising from a HBCF claim?*	
If Yes enter claim numb	er	
Does your builder's lice	nce cover all work being contracted a	and included in this application?*
Yes No		

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 below construction types from A to E. This sho	ould match	the one selected on pages 4 to 7).
A - New single dwelling construction		
B - Single dwelling alterations/additions - structural		
C - Single dwelling renovations - non-structural		
D - New duplex, dual occupancy, triplex and/or terrace (attached) of including a new single dwelling with a granny flat/secondary dwelling with a granny flat/secondary dwelling with a granny flat/secondary dwelling with a		ion
E - Swimming pools		
2. Owner/developer details (as per contract)		
Please do not enter Builder details.		
Owner/developer (name in full)*		
ABN		
Registered business name		
Address type* Billing Home Business Other Address*		
, radioss		
Suburb/town*	State*	Postcode*
Subara, town	State	losteode
Telephone Mobile		
Owner/developer primary email address*		
Owner/developer primary email address		
Is it a speculative project? (a project that the builder carries out for themselves on land Yes No	that they c	wn)*
Is the owner of the land not the contracting party and/or is there any relabetween the owner/developer and the builder?* Yes No	tionship	(other than family)
Please select the related party interests:		
Joint ventures Land ownership Common director	Share	eholders
Please provide full details of the owner of the land		

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 man	agement construct	tion 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)	the building work to be undertaken* (Des	scription 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		ction finance lender
Settlement on completion	Other (provide details)	
	nsistent with your Industry Association's	s guidelines?*
Yes No		
If 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	payments
Other (provide advise)		
	duled progress payments do not exceed	I the value of work performed and the
materials supplied under the cor		Title value of work performed and the
Yes No		
If no please provide details*		
8. Construction type		
Select only one of the below cor	nstruction types (A-E). This must match	n the construction type selected on
page 2.		
A - New single dwelling cor	estruction	
Addition/new - Granny flat*	Basement/underground parking*	Attic*
Yes No	Yes No	Yes No
Garage*	Carport*	Swimming pool*
Yes No	Yes No	Yes No
Internal floor covering*	Transportable house*	Kit home - Erect/construct*
Yes No	Yes No	Yes No
Landscaping	Kit home - Supply and erect/const	:ruct*
Yes No	Yes No	

Base type*					
Bearers and joists	Concre	ete slab on ground			
Concrete slab on strip footings	Pole co	onstruction			
Steel framed high set	Other				
Wall construction type*					
Brick/block veneer	Solid r	nasonry			
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					
Services:					
Air conditioning* Central h	neating* Sc	lar panels*	Elevat	or/escalat	or etc*
Yes No Yes	No	Yes No	Y	'es	No
B - Single dwelling alterations/ Addition - New storey* Addition Yes No	additions - structu - New bathroom/W0		dition - New k	pedroom*(i	nsert number)
Addition - New carport* Addition	- New garage* Ac	ldition - New kitche	n* Additi	on - New	laundry*
Yes No Yes	No	Yes No	Y	'es	No
Addition - New living room* (insert nu	mber) Addition - 1	New screened enclo	sure, veranc	dah, porch	, deck etc*
	Yes	No			
Addition - New shed* Addition	- Other				
Yes No					
Alterations - Attic conversion*	Alterations - Baseme	ent conversion* Alte	erations - Exi	sting bath	room/WC*
Yes No	Yes No		Yes	No	
Alterations - Existing bedroom*	Alterations - Existing	carport* Alte	erations - Ex	kisting gar	age*
Yes No	Yes No		Yes	No	
Alterations - Existing granny flat*	Alterations - Existing	kitchen Alte	erations - Ex	kisting laur	ndry*
Yes No	Yes No		Yes	No	
Alterations - Existing screened	=		erations - Ho		
enclosure, verandah, porch, deck etc*		shed*	ng/restumpi	1	
Yes No	Yes No		Yes	No	
Alterations - Underpinning/piering*		rnal* Wa	terproofing	1	*
Yes No	Yes No		Yes	No	
Masonry fencing*	Driveway/paving*	Fire	protection	1	stallation*
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	nstruction. f these construction types will be	nny flat), dual occupancy, triplex strata/community titled, use
Is separate price/value per dwelling	required?* Total number of c	lwellings in project
Yes No		
Please indicate price for each dwelling	NG (please complete if separate price/value per	dwelling required)
House no.s		
\$		
\$		
\$		
<u>'</u>		

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.