

# Owner Builder Warranty Insurance Proposal - SA

Please answer ALL questions

## 1. DETAILS OF THE INSURED

Owner Builder Details:

\_\_\_\_\_  
\_\_\_\_\_

Trading Name:

\_\_\_\_\_  
\_\_\_\_\_

Current Residential Address:

\_\_\_\_\_  
\_\_\_\_\_

State: Postcode:

\_\_\_\_\_  
\_\_\_\_\_

Phone: Email:

\_\_\_\_\_  
\_\_\_\_\_

Property for Sale Address:

Flat/Unit No: Unit No: Lot No:

\_\_\_\_\_  
\_\_\_\_\_

Street:

\_\_\_\_\_  
\_\_\_\_\_

Suburb:

State: Postcode:

\_\_\_\_\_  
\_\_\_\_\_

## 2. TYPE OF OWNER-BUILDER WORK

Identify the type of work to be insured. For example, if the work includes several types of work eg: Garage, Swimming Pool.

- Single storey       Double storey       Other
- Construction of a Dwelling
- Construction of a Dwelling Extension
- Construction of a Garage, Carport
- Renovation of a Dwelling
- Completion of a Dwelling
- Construction of a Swimming Pool

Provide a detailed description of Owner Builder work  
(eg: construction of two storey dwelling with garage)

Floor area of project: m<sup>2</sup>

\_\_\_\_\_  
\_\_\_\_\_

Replacement cost of work @ current day rates: –

\$ \_\_\_\_\_  
\_\_\_\_\_

Replacement cost of swimming pool @ current day rates: –

\$ \_\_\_\_\_  
\_\_\_\_\_

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

## 3. DETAILS OF CONTRACTORS WHO CARRIED OUT WORKS

Type of Work	Name	Address	Licence No.
Bricklayer (if used and available)			
Carpenter (if used and available)			
Plasterer (if used and available)			

## 4. APPLICANT HISTORY

Have you at any time ever been refused or declined Builders Warranty Insurance?

Yes  No

Have you purchased Builders Warranty Insurance as an Owner Builder within the last five years?

Yes  No

Have you ever held a builders/contractor licence or registration?

Yes  No

Have you ever had a claim against you or been directed to repair/replace defective workmanship as a result of a complaint by a Homeowner?

Yes  No

Is there any relationship between the Owner Builder and the Purchaser?

Yes  No

Have you ever been declared bankrupt or entered into a deed of assignment/ composition or been subject to a legal judgement or are currently involved in any legal proceedings?

Yes  No

*If you answered yes to any of the above questions please supply full detail*

## 5. DECLARATION

This declaration must be completed and signed by or on behalf of all parties making this application.

I/we declare that:

- i. the answers and information given by me/us in this proposal are true and correct in all respects and that no information has been withheld which would affect Assetinsure's decision about accepting this insurance and where answers in this proposal are not my/our own handwriting, they have been checked by me/us and I/we agree they are correct
- ii. I/we have read and understood the clauses detailed under the Important Information in this proposal
- iii. if there was insufficient space to fully answer any questions, we have attached supplementary pages providing the additional information required
- iv. I/we authorise Assetinsure to give to, or obtain information from other insurers or an insurance or credit reference bureau, any information relating to these insurance covers, and any other insurances held by me/us and claims under those insurances
- v. I/we understand that if this Proposal is accepted the insurance cover will be subject to the terms and conditions set out in Assetinsure Owner Builder Warranty Insurance Policy
- vi. I/we further acknowledge that Assetinsure, their agents or employees reserve the right to decline this proposal
- vii. I/we acknowledge that on issuance of an individual Owner Builder Warranty Certificate it is the purchaser and the successors in title to the purchaser who is the Insured and not me/us as the Applicant/ Owner Builder
- viii. I/we confirm that the information contained in this application is true and correct
- ix. I/we have read and understood the terms and conditions of the Financial Services Guide
- x. By providing this information and signing this form, you confirm you have the consent of the alternate contact to provide their name and for them to provide your current details if Assetinsure cannot reach you at your usual address

### Applicants

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: / /

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: / /

Please supply a future forwarding address:

\_\_\_\_\_

Alternate Contact (Optional):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

(to be used only when contact cannot be made with you at your usual address)

## 6. DOCUMENT CHECKLIST



To avoid delays with processing your Warranty Insurance Proposal, use this checklist to ensure you include all the required documentation.

### SA Checklist

1. A Completed & Signed Application Form  
(To engage an accredited inspector see [www.buildsafe.com.au](http://www.buildsafe.com.au))
2. Development Approval / Building Rule Consent
3. Certificate of Occupancy
4. Drivers Licence
5. Defect Inspection Report from an approved inspector with P.I Insurance (no more than 6 months old.)

## 7. CONVEYANCER/SOLICITOR DETAILS

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## 8. QUESTIONNAIRE

How did you find out about BuildSafe?

- Conveyancer/Solicitor  
 Inspector  
 Internet search  
 Google Ad  
 Friend  
 Other: \_\_\_\_\_

Are you building again?

Yes  No

- Owner Builder  
 Registered Builder or  
 Buying a new home

## 9. PAYMENT DETAILS

### PAYMENT OPTIONS Bank Cheque - Direct Payment - Credit Card (Visa or MasterCard Only)

Our bank details  
Account name: BuildSafe Insurance Brokers Pty Ltd  
BSB: 183 334 Macquarie Bank  
Account No: 305 584 781

**Please Note:** Direct payment requires a copy of the transaction receipt with your proposal as proof of payment. Subject to bank clearance.

**Note: We cannot accept Personal or Business Cheques**

### CREDIT CARD DETAILS (VISA or MASTERCARD)

Cardholder name: \_\_\_\_\_

Expiry date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Card no:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Signature: \_\_\_\_\_

Authorisation to deduct premium amount

1.2% Surcharge applies to all Credit and Debit card payments

PLEASE RETURN TO:

**BuildSafe Insurance Brokers Pty Ltd**  
PO Box 2294, Seaford Vic 3198  
Phone: 1300 763 016  
Fax: 03 9773 6351  
Email: [warranty@buildsafe.com.au](mailto:warranty@buildsafe.com.au)

## 10. IMPORTANT INFORMATION

### Duty of Disclosure

This policy is subject to The Insurance Contracts Act 1984. Under that Act you have a Duty of Disclosure.

Before you take out insurance with us you have a duty to tell us of everything that you know, or could reasonably be expected to know, that is relevant to our decision to insure you and to the terms of that insurance. If you are not sure whether something is relevant you should inform us anyway.

You have the same legal duty to inform us of those things before you renew, extend, vary, or reinstate your contract of general insurance.

Your duty however does not require disclosure of things that:

- reduce the risk
- are common knowledge
- we know or, in the ordinary course of our business, ought to know, or
- we have indicated we do not want to know.

If you do not comply with your Duty of Disclosure, we may be entitled to:

- reduce our liability for any claim
- cancel the contract
- refuse to pay the claim
- avoid the contract from its beginning, if your non-disclosure was fraudulent

### Privacy Statement

Assetinsure respects your privacy and operates at all times in accordance with its Privacy Policy. Any personal information provided by you will be treated in accordance with the Privacy Act 1988 (Cth). This privacy notification provides a summary of how Assetinsure treats your personal information, and it is recommended that you read Assetinsure's Privacy Policy in conjunction with this notice.

Assetinsure primarily collects your personal information via this form to assess your request for insurance and to administer your policy but may also use this information to settle an insurance claim, provide other insurance services as requested by you, and also to notify you about other Assetinsure services or promotions from time to time.

If you do not provide the information requested you may breach your Duty of Disclosure, your application may not be capable of being accepted, additional conditions may be imposed on any cover provided or Assetinsure may not be able to administer your policy.

In order to provide its insurance services Assetinsure may need to disclose your personal information to third parties including, but not limited to: agents, underwriters, advisors and brokers; claims management and other service providers; claims adjusters, loss assessors and other claims investigators; lawyers; reinsurers and reinsurance brokers; or as required by law (for a full list see Assetinsure's Privacy Policy). In the event of a claim, Assetinsure may disclose your personal information (including sensitive information) to overseas reinsurers for the purpose of assessing your claim. Assetinsure will only share information with third parties where Assetinsure reasonably believes it is necessary in assessing your insurance claim and in providing the products and services requested.

In accordance with Assetinsure's Privacy Policy you may obtain access at any time to personal information that Assetinsure or its service providers hold on you. Assetinsure's Privacy Policy contains information about how to access and correct the personal information Assetinsure holds on you and also how to complain about a breach of privacy. If you would like additional information about privacy or would like to obtain a copy of the Privacy Policy, please contact Assetinsure's Privacy Officer by:

Online at: [http://www.assetinsure.com.au/ssl/cms/files\\_cms/AIPrivacyPolicy.pdf](http://www.assetinsure.com.au/ssl/cms/files_cms/AIPrivacyPolicy.pdf)

By phone on: 02 8274 2898

By email to: [privacy@assetinsure.com.au](mailto:privacy@assetinsure.com.au)

By letter to the Privacy Manager at: Assetinsure, 44 Pitt Street, Sydney, NSW 2000

In signing this form you expressly consent to us using your personal information in accordance with our Privacy Policy. You can also download a copy of Assetinsure's Privacy Policy by visiting [www.Assetinsure.com.au/docs/PrivacyPolicy.pdf](http://www.Assetinsure.com.au/docs/PrivacyPolicy.pdf)

## Why Choose BuildSafe!

**BuildSafe has been helping Owner Builders & Renovators since 1996** and are the only specialist in Owner Builder Insurances.

### Quick Turnaround

Paperwork is processed quickly and efficiently as our service includes urgent response facilities, i.e. - we are able to issue the insurance policy by email or fax.

### Expert Knowledge

Providing particular help for those with complex cases.

### Less Stress and Hassle

Our underwriting and service support package provides you with peace of mind, easy policy completion and follow up support and advice.

### Our Experience

BuildSafe and our sister company, Australian Owner Builders have been helping owner builders for the past 24 years. We have the proven track record and know all the pitfalls and their solutions.

### Don't take our word.....

*Just a short note to thank you for your prompt and efficient handling of this matter. I will be happy to recommend you and your company at any opportunity.  
With thanks,  
Andrew J Lean*

*Thanks for your excellent and quick service.  
Regards,  
Kerry Stotten*

*Dear Michelle,  
I would again like to thank you for your the efficient and friendly manner which you showed us throughout this process. It has been a pleasure dealing with you and your firm and we will surely recommend your services to family and friends.  
Much appreciated,  
Deb*

*Just a brief email to thank you for your prompt assistance with our owner builder warranty.*

*You made the experience as simple & painless as possible. I would thoroughly recommend the company & you personally to anyone looking for owner builder insurance.*

*Thanks again,  
Jan*

*Hi BuildSafe Team,  
thank you so much for all of your prompt assistance-it is really appreciated!!  
Please find attached completed proposal form and payment of the full amount of the premium quoted. Could you please urgently issue the receipt of payment and formal insurance documentation, if possible this afternoon.  
Kind Regards,  
Greg Simon*

**PH: 1300 763 016**

**Fax: 03 9773 6351**

**PO Box 2294 Seaford Victoria 3198**

**BuildSafe**  
Building Insurances

**[www.buildsafe.com.au](http://www.buildsafe.com.au)**  
**[info@buildsafe.com.au](mailto:info@buildsafe.com.au)**