

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

A DAIX	liana	·····		:
ABN*	Licence	number*	Licence exp	iry date (DD/MM/YYYY)
Registered business	s name	Business	address (not PO Box ac	ddress)*
Suburb/town*			State*	Postcode*
Telephone	Mobile	Email* (t.	his is the preferred form o	of contact)
	cation arising from an HE No Im number	BCF claim?*		



Does your builder's licence cover all work being contracted and included in this application?* Yes No							
on your licence covers the		sw.gov.au to check whether the ted. If you are not properly licue HBC insurance cover.					
Construction type* (select Section 8. Construction Type).		tion types from A to C. This shou	uld match the one you select in				
A - New dwelling co	nstruction (includes single	and multi-dwelling)					
Will this dwelling	g be part of a strata or com	munity title development?					
Yes	No						
B - Building work to	an existing dwelling (include	des single and multi-dwelling	g)				
C - Swimming pools							
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).							
2. Owner/developer of Please do not enter builded Owner/developer (name in)					
Registered business name			ABN*				
Address type* Billing Ho Address*	ome Business	Other					
Suburb/town*		State*	Postcode*				
Telephone	Mobile	Owner/developer primary	email address*				
Is it a speculative project?	(a project that the builder	ios out for thomselves on Is and the	ant they ewn)*				
Yes No	(a project that the bullder carr.	ies out for themselves on land th	iai iney owny				



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/developer and the Builder?
Yes No	
Please select the related party interests:	
Joint ventures Common director	Land ownership Shareholders
3. Site address	
House no.* House no. suffix Unit no.	Address site name (e.g. property/estate)
Building name	Street name/type*
Suburb/town*	State* Postcode*
If you don't know the house number, complete the fo	llowing*
Lot number* Plan type* (deposited plan, strata plan,	unregistered) Plan number* Section number
4. Contract details	
Builder's project number	Estimated start date (DD/MM/YYYY)*
Builder's project namber	Estimated start date (DD) Pirity 11117
Estimated completion data	Actual or estimated data contract is to be signed
Estimated completion date (DD/MM/YYYY)*	Actual or estimated date contract is to be signed (DD/MM/YYYY)*
Date contract signed (actual/proposed) (DD/MM/YYYY)*	
5. Contract details	
Standard fixed price/lump sum contract	
Speculative development including builder margin (excluding land value)	
Cost plus contract: Budget including margin	Builder's percentage margin
Project management construction cost budget	Management fee
	uplex etc, please indicate amounts in section A 2 - New (Multi-)
Dwelling construction)	



HBCF premium (if included in the	contract price)	Net conf	tract price	(Excluding HBCF premium)
Is this an architect-tendered project	ct and/or will it be	managed	by an arcl	nitect/designer?*
If yes, name of architect/designer*	Telepho	no*		Builder's percentage margin*
if yes, flame of architect/designer	Тегерпс	, i i e		Dulider's percentage margin
Are there any items of work to be	nomploted or supp	diad by th	0.00m0r3*	
Are there any items of work to be of Yes No	completed or supp	леа бу тт	e owner:	
If yes please provide details of the	work to be	Provide	the estima	ated value of the work to be
completed or supplied by the own				olied by the owner*
6. Construction description* Please provide a description of the undertaken will appear on the Certificate		oe underta	aken* <i>(Des</i>	cription of building work to be
Number of storeys*	Living area (squai	re metres)	Garage/c	arport/verandah (square metres)*
_				
7. Funding and progress pay How will the project be funded? Progress payment by owner	ment details* Settlement	on compl	letion	
Progress payment by a construction finance lender	Other (prov	ide details)		
Are your progress payments consist and the second of the s	stent with your Inc	lustry Ass	ociation's	guidelines?*
If no please provide details*				
I/we do not belong to an Indi	ustry Association			
My Industry Association does	s not have any guid	delines on	progress	payments
Other (provide advise)				
Can you confirm that your schedul the materials supplied under the co			ot exceed	the value of work performed and
Yes No				
If no please provide details*				



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* Landscaping' 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 (Construction Type H01)

_	-		owing: duplex, triplex, semi-detacl associated structures (for examp		
Is separate price/value per dwelling required?*			Total number of dwellings in p	roject	
Yes No					
Please indicate price for each House numbers	h dwelling <i>(plea</i>	se complet	e if separate price/value per dwelling	g required)	
Number of dwellings that a	are:		No.		
One bedroom					
Two bedrooms					
Three bedrooms					
Four bedrooms					
Other					
To	otal number of	dwellings			
No of storeys*					
Shared 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.)*	igs (for example	e, gymnas	ium, 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*	Y	'es	No	Concrete	slab on g	ground*		Yes		No
Concrete slab on strip footings*	Y	'es	No	Pole const	truction*			Yes		No
Steel framed high set*	Y	'es	No	Other*						
Wall construction type*										
Brick/block veneer*	Y	'es	No	Solid mase	onry*			Yes		No
Timber boards/ weatherboards*	Y	'es	No	Other*						
Site fall across the building e	nvelope	e ^{1*} (metres	;)							
Site fall across the building envelope book lowest point on the envelope book	•				-	•	envelo	ope boui	ndary	to the
Individual dwelling features	(non-sł	nared):								
Garage covering*	Attic*			Carport*		I	ntern	al floo	r*	
Yes No	Ye	es	No	Yes	S	No		Yes		No
Swimming pool*	Landsc	aping*								
Yes No	Ye	es	No							
Individual dwelling services	(non-sh	nared):								
		heating*		Solar par	nels*	E	Eleva	tor/esc	alato	r etc*
Yes No	Ye	es	No	Yes	S	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?* Yes No										
Total number of dwellings in	the stra	ata or cor	nmunity t	itle scheme	9.					
New Additions				New balco	ony vera	ndah				
New storey	Y	es	No	patio, por				Yes		No
New bathroom / WC (insert number)	Y	'es	No	New bedronumber)	oom (ins	ert		Yes		No
New carport	Y	'es	No	New garaç	ge			Yes		No
New kitchen	Y	'es	No	New laund	dry			Yes		No



New living room	Yes	No	New pergola		Yes		No		
New screened enclosure	Yes	No	New solar panels		Yes		No		
New shed	Yes	No.	Other*						
Work to existing rooms / structures / features / components etc.									
Attic conversion*	Yes	No	Balcony, verandah, patio, porch, deck etc.*		Yes		No		
Balustrades*	Yes	No	Basement conversion*		Yes		No		
Bathroom/WC*	Yes	No	Bedroom*		Yes		No		
Carport*	Yes	No	Cladding*		Yes		No		
Driveway/paving*	Yes	No	Fencing (masonry)*		Yes		No		
Fencing (other than masonry)*	Yes	No	Fire protection services installation*		Yes		No		
Garage*	Yes	No	House lifting/restumping*		Yes		No		
Kitchen*	Yes	No	Laundry*		Yes		No		
Pergola*	Yes	No	Retaining wall*		Yes		No		
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	No	Underpinning/piering*		Yes		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								
Note: If you answer Yes to this question, New pools intended to be located within a Class 2 or mixed use building are not covered by the H05 Swimming Pools category. Please use the H02 Building Work to an Existing Residential Apartment Building category in this form: <i>HBCF project application - Residential apartment building projects</i> .								
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		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.