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AFS Licence No: 239545



APPLICATION FORM – OWNER BUILDER

Domestic Building Insurance

i ABOUT THIS FORM

Owner Builders have special obligations when selling a property they have worked on, if:

- Domestic building work was carried out on that home before the sale, and
- The value of that domestic building work exceeded \$16,000 at the time the work was carried out.

Before entering into a contract of sale for the home, the Owner Builder must apply for, and be successful in obtaining a domestic building insurance policy to cover the work done on the property. It is not possible to include a conditional clause.

It is therefore critical that a policy is put in place prior to signing the contract of sale. The policy does not commence until the contract of sale is signed, and if the property doesn't sell, you may be able to cancel the policy and obtain a premium refund.

If we decide to issue a policy to the Applicant, we will rely on the information in this form. You must therefore ensure you answer all questions truthfully.

Who should complete this form?

This form should be completed by all the registered proprietors (Owner Builders) of the property on which you have carried out domestic building work.

i ELIGIBILITY WITH QBE/VMIA, WITH ADDITIONAL COVER FROM 1 JULY 2015

The insurance being applied for is issued by QBE Insurance (Australia) Limited (**QBE**) as agent for the Victorian Managed Insurance Authority (**VMIA**) in accordance with the Ministerial Order for Domestic Building Insurance issued under section 135 of the *Building Act 1993* (Vic), with additional cover if the Applicant fails to comply with a Tribunal or Court Order for certificates of insurance issued on or after 1 July 2015. The VMIA is a statutory corporation and is the insurer.

i YOUR DUTY OF DISCLOSURE

We require you to disclose to us every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to issue insurance to the Applicant and on what terms.

You are not, however, required to disclose any matter that diminishes the risk to us that is of common knowledge, that we know or in the ordinary course of our business ought to know, or any matter which we waive. We will rely on the information that you provide to us in determining whether to issue insurance to the Applicant and on what terms.

i INFORMATION DISCLOSED IN THIS FORM AND YOUR PRIVACY

Both QBE and the VMIA are committed to safeguarding your privacy and the confidentiality of your personal information. We will only collect personal information from you or about you which is relevant to processing and assessing this application, administering any domestic building insurance policies which may subsequently be issued, including any claims under such policies, and any recoveries and use it in a way that you would expect. The personal information collected may include personal details, construction details, financial information and arrangements. Without this personal information we may not be able to process this application or issue insurance cover. By providing this personal information to us, you consent to us disclosing your personal information to:

- insurance intermediaries
- insurance reference bureaus
- credit reference agencies
- our advisers
- the Victorian Building Authority or other authorities established to regulate or report on the building industry

- those involved in the claims handling process (including assessors and investigators) for the purpose of assisting us and them in providing relevant reporting, regulation, services and products, or for the purposes of litigation.

You also consent to us disclosing your personal information to:

- subsequent owners of the property
- family members or agents authorised by you
- organisations which conduct customer service surveys on our behalf
- people making enquiries for details of any domestic building insurance issued in respect of a nominated property.

Such personal information is limited to:

- o policy number
- o policy inception date
- o property address
- o name of owner builder
- o whether a claim has been made
- o the amount of any indemnity remaining under the policy



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DOMESTIC BUILDING INSURANCE **QM3263-06-15**

SECTION 1. OWNER BUILDER DETAILS

PLEASE USE CAPITAL LETTERS.

A B C

Name(s) of all registered owners of the subject property.

OWNER/APPLICANT 1

First name:

Last name:

Current address:

 State: Postcode:

Phone number:

Mobile:

Email address:

Forwarding address after the property sale (must not be a PO box):

 State: Postcode:

OWNER/APPLICANT 2

First name:

Last name:

Current address:

 State: Postcode:

Phone number:

Mobile:

Email address:

Forwarding address after the property sale (must not be a PO box):

 State: Postcode:

SECTION 2. ADDRESS OF PROPERTY FOR SALE

Lot number: Unit number/s: Street number: Street name:

Suburb/Town: State: Postcode:

SECTION 3. PERMIT AUTHORITY/REGISTERED BUILDING SURVEYOR

Name of Registered Building Surveyor:

Address:

State: Postcode:

Certificate of consent number

Date issued: / /

Name of Owner Builder on certificate of consent from the Victorian Building Authority:

SECTION 4. TYPE OF OWNER BUILDER WORK

Please tick the type of work:

Construction of a dwelling Completion of a dwelling

Renovation of a dwelling Construction of a garage or carport

Extension of a dwelling Construction of a swimming pool

Other: Please describe the type of works (e.g. shed) Non structural renovation

Floor area of works


Commencement of building work: / /

Completion of building work / /

Occupancy Permit or Certificate of Final Inspection date: / /

Please provide a brief description of the work undertaken

Is the dwelling situated in a designated termite area?

No Yes → If "Yes", please provide evidence of termite treatment for compliance with AS3660 

Was any waterproofing undertaken by a registered tradesperson?

No Yes → If "Yes", please provide a certificate 

SECTION 5. DETAILS OF ALL CONTRACTORS/PERSONS WHO HAVE CARRIED OUT WORK ON THE DWELLING

▲ Must include any registered waterproofing membrane installer for any bathrooms/balconies, geotechnical engineers, electrician, plumber etc.

Type of work	Contractor name, address & phone no.	DBI insurer and/or licence no.(if applicable)	Value of work
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Total value of building work:			\$

SECTION 6. SECOND-HAND MATERIALS

List all second-hand materials (including building products, fixtures, fittings, appliances, paving etc.) installed by the Owner Builder, their contractors, subcontractors or employees in relation to the property.

SECTION 7. INSPECTION DETAILS

Owner Builders must obtain a Defects Inspection Report for any owner-built (managed or arranged) domestic building works, prior to entering into a contract of sale. Failure to do so may result in a purchaser voiding the contract prior to completion.

You will need to provide a Defects Inspection Report (no older than six months from the date of application). This can only be completed by a Registered Building Surveyor, Registered Building Inspector, Engineer or Architect in the State of Victoria.

⚠ Any defects or incomplete works listed in the Defect Inspection Report are excluded from this cover.

Please attach the Defects Inspection Report

Name of Inspector:

Address:

State: Postcode:

Telephone:

Mobile:

Email:

Registration number:

SECTION 8. PERSONAL BACKGROUND INFORMATION

Have you purchased Domestic Building Insurance as an Owner Builder within the last five years? Yes No

Do you hold or have you ever held a builder's/contractor's licence or registration? Yes No

If YES date valid from: / / to / /

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 details.

SECTION 9. CHECKLIST

 **Please attach the following documentation** (Failure to provide all documents will delay the processing of this application):

- | | |
|--|--|
| <input type="checkbox"/> Completed and signed application form | <input type="checkbox"/> Copy of Waterproofing Certificate (if applicable – Section 4) |
| <input type="checkbox"/> Defects Inspection Report | <input type="checkbox"/> Copy of the Occupancy Permit or Certificate of Final Inspection |
| <input type="checkbox"/> Copy of the Building Permit | <input type="checkbox"/> Copy of the Certificate of Title/Council Rates Notice |
| <input type="checkbox"/> Plans | <input type="checkbox"/> Copy of Termite Treatment Report (if applicable – Section 4) |
| <input type="checkbox"/> Proof of identification for each owner listed in Section 1, such as a copy of their driver's licence or passport. | <input type="checkbox"/> Certificate of Consent from Building Practitioner Board |
| <input type="checkbox"/> Certificate of Compliance from plumbing and/or electrical contractors | |

SECTION 10. APPLICANT'S DECLARATION

COPY AND ATTACH AS REQUIRED FOR EACH OWNER

I acknowledge that upon issue of a Domestic Building Certificate of Insurance, it is the purchaser of the property and the successors in title to the purchaser who is/are insured and not me/us as the Applicant/Owner Builder.

I confirm that the information contained in this application is true and correct.

I acknowledge that QBE and the VMIA reserve the right to reject any application for insurance.

I acknowledge that QBE and the VMIA may seek additional information from me/us as required.

I acknowledge that for certificates of insurance issued on or after 1 July 2015, in addition to cover provided in accordance with the Ministerial Order, the purchaser and subsequent owners are also entitled to make a claim if the Applicant fails to comply with a Tribunal or Court Order.

I have read and understood the section titled 'Information disclosed in this form and your privacy' on page 1 of this form.

I will reimburse the VMIA any amount it pays to the insured in settlement of a claim under the policy if:

- I fail to comply with a Tribunal or Court Order, and/or
- I fail to comply with any laws or regulations relating to the building work, and/or
- For used second-hand materials which were not declared in this form or to the prescribed building inspector and if not noted in the prescribed building inspector's report or in the contract of sale, and/or
- I did not carry out the works in a proper and workmanlike manner.

Authority to release information

I authorise QBE and the VMIA to give to, or obtain from, other insurers or insurance reference bureaux, credit reporting agencies, their advisers, the Victorian Building Authority or other authorities established to regulate or report on the building industry, those involved in the claims handling process (including assessors and investigators) and those involved in any way in connection with building work insured under any domestic building insurance policy issued as a result of this application, including those people making enquiries as identified on page 1 of this form, any information about or contained in this application, any domestic building insurance policy subsequently issued, and any claims and recoveries, including this completed application and my and the Applicant's insurance claims history and credit history.

1. Declared by:

For and on behalf of:

Position title:

Signature:

Date:

2. Declared by:

For and on behalf of:

Position title:

Signature:

Date: