

Project Application for CIMS

All Work Excluding Multiple Dwelling Projects

(* Denotes a mandatory field)

- Use this form for projects involving Single Dwelling: 'New Construction', 'Alterations/Additions – Structural', 'Renovations – Non Structural' and 'Duplex, Dual Occupancy, Triplex and/or Terrace (Attached) Construction' and 'Swimming Pools'.
- For all multiple dwelling projects, including 'New Multiple Dwelling Projects (< = 3 storey)', 'Structural Alterations & Additions' and 'Non-Structural Renovations' to a multiple dwelling, please complete the "Multiple Dwelling Projects" application form.
- References in this form to Builder and Building work include trade and other building contractors / work.
- Please submit this application to your nominated insurance broker who can provide assistance in completing the form.

Builder Details

Builder's Name (i.e. the legal name under which you contract and as shown on your Builder's Licence)* ABN*

Licence No. * Licence Expiry Date* Registered Business Name

Business Address (Not PO Box Address)* Suburb State Postcode

Email, Business Telephone No and/or Mobile Phone No of key contact (*Email is the preferred form of contact*)*

Email of Key Contact Business Telephone No. Mobile No. of Key Contact

Is this Project Application arising from a HBCF claim?* Yes No ▶ If 'Yes' enter Claim No.

Notes

Does your builder's Licence cover all work being contracted and included in this application?* Yes No

You can visit NSW Fair Trading's website at www.fairtrading.nsw.gov.au to check whether the licence category shown on your licence covers the type of work being contracted. If you are not licensed for the work being contracted, HBCF cover is unable to be issued.

Construction Type* (select only ONE of the below construction types from A to F. This should match the one to select on pages 3 to 5)

<p>A New Single Dwelling Construction</p> <p>B Single Dwelling Alterations / Additions - Structural</p> <p>C Single Dwelling Renovations - Non Structural</p>	<p>D New Duplex, Dual Occupancy, Triplex and / or Terrace (Attached) Construction</p> <p>E Swimming Pools</p> <p>F Other </p>
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Owner/Developer Details (as per contract)

Owner / Developer - Name in Full* ABN

Address * Suburb State Postcode

Address Type* Billing Home Business Other

Email, Business Telephone No and/or Mobile Phone No of key contact (*Email is the preferred form of contact*)*

Email of Key Contact

Business Telephone No

Mobile Phone No

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Is there any relationship between the owner / developer and the builder?* Yes No ► Provide full details of any related party interests (eg: family members, joint ventures/ land ownership, common director / shareholders etc.)

<input type="text"/>

Is it a speculative project?* (*a project that the builder carries out for themselves on land that they own*) Yes No

Site Address

House No*

House No Suffix

Address Site Name (Eg: Property/ Estate)

Building Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Street Name / Type*

Suburb*

State

Postcode*

<input type="text"/>	<input type="text"/>	<input type="text" value="NSW"/>	<input type="text"/>
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If house number NOT known, complete the following*

Lot No*

Plan No*

Plan Type*

Section No

Contract Details

Builder's Project Number

Estimated Start Date*

Estimated Completion Date*

Date Contract Signed (Actual / Proposed)*

Actual Project Completion Date

Contract Type*

Standard Fixed Price/Lump Sum Contract

Speculative Development including Builder Margin (excluding land value)

Cost Plus Contract: Budget including Margin

Project Management Construction Cost Budget

Builder's Percentage Margin %

Management Fee \$

Contract Price* \$

Is this an Architect tendered project and/or will it be managed by an Architect/Designer?* Yes No ►

Name of Architect / Designer

Telephone No

Builder's Margin

<input type="text"/>	<input type="text"/>	<input type="text" value=""/>
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Are there any items of work to be completed or supplied by the owner?* Yes No ►

If 'yes', please provide details of the work to be completed or supplied by the owner*

<input type="text"/>

Provide the estimated value of the work to be completed or supplied by the owner*

\$

Construction Description

Please provide a description of the construction to be undertaken*

<input type="text"/>

No of Storeys : *

Living Area

Garage / Carport / Verandah

Funding and Progress Payment Details

How will the project be funded? *

Progress Payment by owner

Progress Payment by Construction Finance Lender

Settlement on completion

Other - Provide Details

Are your progress payments consistent with your Industry Association's guidelines?* Yes No ▶

If 'No' please provide details*

Can you confirm that your scheduled progress payments do not exceed the value of work performed and the materials supplied under the contract to that stage?* Yes No ▶

If 'No' please provide details*

Construction Type

Select **ONLY ONE** of the below construction types (A to F). This **MUST** match the Construction Type selected on page 1.

A New Single Dwelling Construction

Basement / Underground parking*	Yes	No	Attic*	Yes	No
Garage*	Yes	No	Carport*	Yes	No
Swimming Pool*	Yes	No	Landscaping*	Yes	No
Internal Floor Covering*	Yes	No	Transportable House*	Yes	No
Kit Home - Erect / Construct*	Yes	No	Kit Home - Supply & Erect/Construct*	Yes	No

Other

Base Type*

Bearers and Joists

Concrete Slab on Ground

Pole Construction

Concrete Slab on Strip Footings

Steel Framed High Set

Other

Wall Construction Type*

Brick / Block Veneer

Timber Boards / Weatherboards

Solid Masonry

Other

Site Fall across the building envelope*

Metres

Services

Air Conditioning*	Yes	No	Central Heating*	Yes	No
Solar Panels*	Yes	No	Elevator / Escalator etc.*	Yes	No

B Single Dwelling Alterations / Additions - Structural

Addition - New Storey *	Yes	No	Addition - Granny Flat*	Yes	No
Addition - New Bathroom / WC * (insert Number)		<input type="text"/>	Addition - New Bedroom* (insert Number)		<input type="text"/>
Addition - New Carport*	Yes	No	Addition - New Garage*	Yes	No
Addition - New Kitchen*	Yes	No	Addition - New Laundry*	Yes	No

Addition - New Living Room* (insert Number) Addition - New Shed* Yes No

Addition - New Screened Enclosure, Verandah, Porch, Deck etc.* Yes No

Additions - Other

Alterations - Attic Conversion* Yes No Alterations - Basement Conversion* Yes No

Alterations - Existing Bathroom / WC* Yes No Alterations - Existing Bedroom* Yes No

Alterations - Existing Carport* Yes No Alterations - Existing Garage* Yes No

Alterations - Existing Granny Flat* Yes No Alterations - Existing Kitchen* Yes No

Alterations - Existing Laundry* Yes No Alterations - Existing Shed* Yes No

Alterations - Existing Screened Enclosure, Verandah, Porch, Deck etc.* Yes No

Alterations - House Lifting/Restumping* Yes No Alterations - Underpinning/Piering* Yes No

Masonry Fencing* Yes No Driveway / Paving* Yes No

Fire Protection Services Installation* Yes No Retaining Wall* Yes No

Solar Panel Installation* Yes No Structural Landscaping* Yes No

Alterations - Other

C Single Dwelling Renovations - Non Structural

Bathroom Renovation* Yes No Kitchen Renovation* Yes No

Laundry Renovation* Yes No Prefabricated Patios* Yes No

Prefabricated Carports* Yes No Prefabricated Garages* Yes No

Prefabricated Sheds* Yes No Fencing* Yes No

Minor Swimming Pool Repairs* Yes No Driveway / Paving* Yes No

Pergolas* Yes No Replacement of Roof Coverings* Yes No

Timber Decks* Yes No

Trade Work Involving:

Bricklaying / Stonemasonry* Yes No Carpentry / Joinery* Yes No

General Concreting* Yes No Glazing* Yes No

Painting and Decorating* Yes No Roof Plumbing (incl. Metal Roofing)* Yes No

Roof Slating/ Tiling* Yes No Wall and Floor Tiling* Yes No

Plastering - Dry* Yes No Plastering - Wet* Yes No

Plumbing / Draining* Yes No Gasfitting* Yes No

Electrical Wiring / Repairs* Yes No Air Conditioning / Heating* Yes No

Fire Protection Services* Yes No Renovation - Other

D New Duplex, Dual Occupancy, Triplex and/or Terrace (attached) Construction

Total Number of Dwellings in Project*

Shared Structural Elements and Services

Common Walls* Yes No Common Roofing* Yes No

Common Driveway / Parking Area *	Yes	No
Shared Air Conditioning System *	Yes	No
Solar Panels *	Yes	No
Swimming Pool *	Yes	No
Other	<input type="text"/>	

Shared Garage / Carport*	Yes	No
Shared Central Heating System*	Yes	No
Basement / Underground Parking *	Yes	No
Landscaping*	Yes	No

Base Type*

- Bearers and Joists
- Concrete Slab on Ground
- Pole Construction
- Concrete Slab on Strip Footings
- Steel Framed High Set

Other

Wall Construction Type*

- Solid Masonry
- Timber Boards / Weatherboards
- Brick / Block Veneer

Other

Site Fall across the building envelope in* Metres

Individual Dwelling Features (Non-Shared)

Garage*	Yes	No
Carport*	Yes	No

Attic*	Yes	No
Internal Floor Covering*	Yes	No

Services - (Individual Dwelling Non-Shared)

Air Conditioning*	Yes	No
Solar Panels*	Yes	No

Central Heating*	Yes	No
Elevator / Escalator etc.*	Yes	No

E Swimming Pools

New InGround Concrete *	Yes	No
New InGround Vinyl Lined *	Yes	No
New Above Ground *	Yes	No
Alterations / Repairs to Existing Pool *	Yes	No

New InGround Fibreglass*	Yes	No
New InGround - Other	<input type="text"/>	
New Internal Pool (Inside Dwelling)*	Yes	No
New Spa*	Yes	No

F Other

Type of Project*

Trades Involved

Bricklaying / Stonemasonry*	Yes	No
General Concreting*	Yes	No
Painting / Decorating*	Yes	No
Roof Slating / Tiling*	Yes	No
Plastering - Dry*	Yes	No
Plumbing / Draining*	Yes	No
Electrical Wiring / Repairs*	Yes	No
Fire Protection Services*	Yes	No

Carpentry / Joinery*	Yes	No
Glazing*	Yes	No
Roof Plumbing (incl Metal Roofing)*	Yes	No
Wall and Floor Tiling*	Yes	No
Plastering / Wet*	Yes	No
Gasfitting *	Yes	No
Air Conditioning / Heating*	Yes	No

Other

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 HBCF for building work done in New South Wales that requires such insurance under the *Home Building Act 1989* (NSW).

SICorp is regulated by the *Privacy and Personal Information Protection Act 1998* (NSW) and is required to provide the following information to you in relation to your personal information.

Purpose of Collection

SICorp, through its agents, 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 insurance under the HBCF (insurance) in relation to building work requiring such insurance, including:

- evaluating your application
- providing, administering and managing the insurance services following acceptance of an application; and
- investigating, and if covered, managing and processing claims made in relation to any insurance you have applied for with us.

SICorp 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, 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.

Examples of personal information collected include:

- your insurance claim history;
- your credit history;
- your financial status and history; and
- your corporate directorship history.

Disclosure

SICorp 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 your application for eligibility, administer any policy or manage any claim under the policy.

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 intermediary 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.

NSW Self Insurance Corporation, PO Box A2615, Sydney South, NSW 1235

DO NOT send this form to the above address – lodge the form with your Insurance Broker. This address is provided in accordance with the *Privacy and Personal Information Protection Act 1998*.

Builder Declaration

This declaration is to be executed either by the sole business proprietor/all business partners in a partnership/sole director if a sole director company/at least two (2) directors of the company for other companies.

I/We declare that by completing this application and making this declaration, I/we appoint the intermediary to whom this application is provided as my/our broker for the purpose of applying for eligibility to purchase individual job specific policies for insurance with SICorp from time to time.

I/We confirm that the details on this application form are true and represent a fair and accurate representation of the affair(s) of the applicant(s). If any of the information disclosed in this application alters or materially changes, I/we will notify our intermediary immediately.*

I/We believe that the applicant is currently solvent in its capacity can meet all of its financial obligations as and when they fall due.

I/We acknowledge that SICorp, or its agent, may seek additional information from me/us or our intermediary as required from time to time.

I/We acknowledge that SICorp, or its agent, reserves the right to reject this application.

I/We acknowledge that if our application for insurance under the HBCF is accepted by SICorp, or its agent on SICorp'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.

For personal applicants

I consent to SICorp and its agents collecting, using and disclosing my personal information in accordance with the Privacy Statement.

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 SICorp 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.

Declared by (Name of Authorised Officer)

Declared by (Name of Authorised Officer)

Signature

Date

Signature

Date

***NB: 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.**

Select 'Submit Form' to email the completed form to your Broker.

You MUST sign with an electronic signature, before submitting the form.

Select 'Print Form' to print and sign before sending the completed form to your insurance Broker

Intermediary / Broker Use Only

Payment Method

- **Paying by Credit Card:** **Master Card** **Visa**

- o We accept Master and Visa cards only.
- o Please enter your credit card details in the section below.
- o Ensure you pay the total amount including the credit card surcharge as per your premium chart.
- o Premium will only be accepted for individual invoices and must be made in full.
- o Any changes or corrections must be authorised by the cardholder's signature.

Card Number

CCV No

Expiry Date

Name of the card holder (as shown on the card)

Signature

- **Paying by Cheque:** Please ensure your cheque payment is made payable to your nominated Broker and is attached to your Application Form.