



## Residential Builders' Warranty Insurance Eligibility Review Application

<b>QBE Policy No.</b>	<b>Previous Insurer</b>
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### Section 1 – General Business Information

Name of Business – The applicant	
Business Address	
Trading Name	ACN/ABN
Business Type:    Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Company <input type="checkbox"/> Trust (Trust Deed Required) <input type="checkbox"/>	
Name as shown on Building/Contracting Licence	
Licence Number	Date First Obtained
	/ /
Contact Person	Business Telephone Number
Mobile Number	Facsimile Number

### Section 2 – Maximum Annual Construction Limit

Existing Eligibility Turnover Limit:	Required Turnover Limit (next 12 months):

Please note that our underwriters will undertake an assessment of your current financial position and you will need to submit the following information/documentation:

- Full and Final Financial Statements (Profit and Loss Statement with Trading Statement, Balance Sheet and Notes to Accounts) for the last full financial year as prepared by your external Accountant and signed by the Applicant / Directors as being true and correct

If the current year end Financial Statements are older than

- (6) six months, Interim Financial Statements are required (Internally prepared accounts are acceptable providing they are signed by the Applicant/Directors or External Accountant as being true and correct and are prepared utilising a recognised accounting package)
- Current Working Capital Position (Section 2) for any required limit in excess of \$5M
- Updated "Statement of Personal Assets and Liabilities" from each Director, Partner and Proprietor of the business

Category	Existing Limit	Required Limit
Single Dwelling Contract	\$	\$
Alterations and Additions	\$	\$
Renovations and Improvements	\$	\$
Swimming Pools	\$	\$
Multi Unit Developments	\$	\$
Domestic Building Cycle:	Average lead time	Average build time
	weeks	weeks

### Section 3 – Statement of Personal Assets and Liabilities *(photocopy this page if more space required)*

This Section requires completion by the following: 1. Sole Trader 2. Each partner in a Partnership

3. All directors of a company 4. All beneficiaries of a trust

Name of Business – Applicant Name

Assets	Value
Principal residence at	
	\$
Other Property at <i>(copies of rates notices for each property required)</i>	
	\$
	\$
	\$
Motor vehicle(s)	
	\$
	\$
	\$
Other Investments	
	\$
	\$
	\$
Cash at bank with	
	\$
	\$
Work in progress <i>(sole traders only)</i>	\$
Trade receivables <i>(sole traders only)</i>	\$

Assets	Value
Mortgage Value	
	\$
Mortgage Loan with	
	\$
	\$
	\$
Vehicle Finance with	
	\$
	\$
	\$
Other Loans	
	\$
	\$
	\$
Credit cards/Other Loans	
	\$
	\$
Overdraft progress <i>(sole traders only)</i>	\$
Trade payables progress <i>(sole traders only)</i>	\$

### Section 4 – Business and Personal Background Information

1. Have you or any business in which you were involved been placed into external administration, liquidation, receivership or a scheme of arrangement (formal or informal) to repay outstanding creditors?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. 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 <input type="checkbox"/> No <input type="checkbox"/>
3. Have you disclosed all of the information of a material nature that could significantly affect the financial position of your business and influence QBE's acceptance of your application?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Have you or any business in which you were involved ever been insured with another Home Warranty insurer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Do you currently have Warranty Eligibility with another provider? (please attach a copy)	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Have you or any business for which you were involved ever been declined Home Warranty Insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Has your previous Home Warranty Insurer provider ever paid a claim or are you aware of any circumstances that may give rise to a claim?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Have you previously been disciplined by any Court or Statutory Building Disputes Tribunal which resulted in payment or rectification orders against you or any business in which you were involved?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Do you currently have a bank guarantee lodged with any other insurer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10. Have you had to provide a deed of indemnity or any other form of security to any other insurer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. Is the applicant a subsidiary of another entity or does it have any subsidiary companies?	Yes <input type="checkbox"/> No <input type="checkbox"/>

If you answered Yes to any of the above questions, please provide details below or attach details separately


## Section 5 – Residential Builders Warranty Insurance Work in Progress Status Report

**Needs to be completed for all projects under construction or where deposits have been taken** *(please copy this page and attach if additional space is required)*

Name of Builder

Builder/Contractor Licence Number



Date contract entered into <i>(dd/mm/yyyy)</i>	Site address <i>If Multiple dwellings are being constructed on the one site, please list the site address once and show the number of units</i>	Contract Value <i>(including GST)</i>	Date work commenced on site <i>(dd/mm/yyyy)</i>	Insured by	Current stage of completion <i>(deposit, Base, Frame, Lock-up, fit-out)</i>	Estimated cost "to complete"	Estimated completion date <i>(dd/mm/yyyy)</i>
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## Section 6 – Checklist

- Fully completed and signed Application form.
- Copy of the current licence/ registration for each of the directors/ partners / business proprietors/building practitioners or nominated supervisors.
- Copy of current Warranty Eligibility Certificate if held with another insurer.
- Technical References for Architect Design and Multi Unit projects.
- Taxation returns or Company/ Trust financial statements for the past two financial years.
- Copy of Trust Deed for Trust applicants.
- Evidence of ownership for all property shown in Section 3.

## Section 7 – Applicant(s) Declaration

**This declaration is to be executed by either the sole business proprietor/all partners in a partnership/sole directors (if only one to sign) or at least two directors of the Company.**

I/We declare that:

1. I/we have read and understood the Privacy Statement and Duty of Disclosure Statements outlined in this application.
2. I/we acknowledge that on issuance of an individual Residential Builders Warranty Certificate, it is the owner who is the insured and not I/we as the applicant/builder.
3. I/we have received a copy of the “Residential Builders Warranty Insurance” policy wording and agree on behalf of the applicant to be bound by the terms and conditions contained in it.
4. I/we believe that the applicant is currently solvent and in its capacity can meet all of its financial obligations as and when they fall due.
5. If any of the information disclosed in this application alters or materially changes, I/we will notify QBE Insurance (Australia) Limited immediately.
6. I/we understand that no Certificates of Insurance will be issued until this application has been accepted by QBE Insurance (Australia) Limited and “Letter of Eligibility” issued.
7. On the issuance of a “Letter of Eligibility”, I/we understand that in the event of a complaint or a claim then the contractor, sole trader, or company and the company directors or partnership and the individual partners are joint and severally liable for the following:
  - To comply with the directions or any judgements made by the Tribunal or Australian Courts to complete or rectify building works.
  - Reimburse QBE Insurance (Australia) Limited any amount in respect to a claim paid, which includes any costs or expenses incurred by the insurer.
8. QBE Insurance (Australia) Limited reserves the right to revoke eligibility of the applicant to purchase individual Job Specific Policies under certain circumstances.
9. I/we declare that all information given in this application and any attachments is true and correct.
10. I/we authorise QBE Insurance (Australia) Limited to give to, or obtain from, other insurers or insurance reference bureaus, credit reporting agencies and government departments any information about this insurance including this completed application and my/our insurance claims history and my/our credit history.

Declared by (Name)

Position/Title

Signature

Position/Title

Signature

For and On Behalf of

For and On Behalf of

Date

For and On Behalf of

Date