



QBE Insurance (Australia) Limited
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AFS Licence No: 239545



APPLICATION FOR A JOB SPECIFIC POLICY – MULTIPLE BUILDING WORKS

THREE OR MORE DWELLINGS

ABOUT THIS FORM

This form will help us decide whether to issue a domestic building insurance policy for a MULTIPLE BUILDING WORKS (THREE OR MORE DWELLINGS) on the one site in Victoria.

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 businesses (sole traders/partnerships/companies) – hereafter referred to as “the Applicant” intending to build three or more dwellings on the one site, this includes:

- a contract with Owners Corporations
- three or more dwellings being built for multiple owners under separate building contracts
- three or more dwellings under one building contract.

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.

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:

- the owners of any building work undertaken by the Applicant which is insured by us
- family members or agents authorised by you
- organisations which conduct customer service surveys on our behalf
- people making enquiries as to whether a nominated builder is eligible for domestic building insurance
- 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 builder
- o whether a claim has been made
- o the amount of any indemnity remaining under the policy.

ACCESS TO YOUR PERSONAL INFORMATION

You can request access to the personal information we hold about you by contacting:

QBE Insurance (Australia) Limited
628 Bourke Street
Melbourne Victoria 3000
Phone: 03 9246 2666

VMIA
PO Box 18409
Collins St East Victoria 8003
Phone: 1300 363 424



Victorian Managed Insurance Authority
ABN 39 682 497 841
PO Box 18409 Collins St East Victoria 8003
P: 1300 363 424 | F: 03 9270 6949
www.dbi.vmia.vic.gov.au

DOMESTIC BUILDING INSURANCE **QM3265 06-15**

SECTION 1. ABOUT THE APPLICANT

PLEASE USE CAPITAL LETTERS.

A B C

⚠ Important: You MUST notify QBE immediately if the answer is Yes to any of the following over the last 12 months:

Has the Applicant's business structure changed (e.g. change from a sole trader to a company?) ☐ No ☐ Yes

Have any of the directors or partners of the business changed? ☐ No ☐ Yes

Has there been a change to any of the registered building practitioners associated with the Applicants? ☐ No ☐ Yes

QBE Policy no:

Building Practitioners Registration number for each director or partner of the Applicant who is a registered building practitioner, or if the Applicant is a sole trader, you:

<input type="text"/> <input type="text"/> - <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> - <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> - <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

What is the name of the building entity (business) for which cover is sought ("the Applicant")?

⚠ This name must EXACTLY MATCH the building contract.

If these details are not correct, the VMIA may refer the matter to the Building Practitioners Board to enquire into the conduct of the relevant registered building practitioners.

ACN:

ABN:

Business address:

State: Postcode:

Telephone:

Mobile:

Are you entitled to claim an Input Tax Credit on the GST component of the premium applicable to this policy?

☐ No

☐ Yes



How much – 100% or other?

SECTION 2. CONTRACT DETAILS

Please specify the category of the multiple building works being completed (tick applicable):

- ☒ Contract with Owners Corporation (**Go to Section 2a**).
- ☒ Three or more dwellings being built for multiple owners under separate building contracts (**Go to Section 2b**).
- ☒ Three or more dwellings under one building contract (**Go to Section 2c**).

2a. CONTRACT WITH OWNERS CORPORATION

 Please attach the Scope of Works and the building contract (if applicable).

Owners Corporation (OC) name:

OC number:

Registered OC address:

State:

Postcode:

What is the contract price? (inc GST)

\$

Signed contract date:

 / /

Estimated start date:

 / /

Estimated completion date:

 / /

Please describe the scope of works to be undertaken for the common property and the value for each item.

Describe scope of works	Estimated Value
	\$
	\$
	\$
	\$
	\$

Is any work to be undertaken outside of the common property area (e.g. to a dwelling/s)?

☒ No ☒ Yes ➔ Please provide details:

Describe scope of works and the unit number/s	Estimated Value
	\$
	\$
	\$
	\$
	\$

2b. THREE OR MORE DWELLINGS BEING BUILT FOR MULTIPLE OWNERS UNDER SEPARATE BUILDING CONTRACTS

⚠ Note: This section applies where there is a requirement for common works, such as:

- A common driveway
- Construction of a road
- Construction of a fire rated wall between adjoining units

📎 Please attach plans and specifications AND the building contract for EACH dwelling.

Estimated start date:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Estimated completion date:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Please provide details and value of any non-residential works included in the development contract/construction price (e.g. shops, commercial office, infrastructure works such as roads, etc):

Describe scope of works	Estimated Value
	\$
	\$
	\$
	\$
	\$

2c. THREE OR MORE DWELLINGS UNDER ONE BUILDING CONTRACT

📎 Please attach plans and specifications AND the building contract for EACH dwelling.

Signed contract date:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Estimated start date:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Estimated completion date:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Please provide details and value of any non-residential works included in the development contract/construction price (e.g. shops, commercial office, infrastructure works such as roads, etc):

Describe scope of works	Estimated Value
	\$
	\$
	\$
	\$
	\$

Name of the Bank/Financier to the project:

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📎 Please attach a copy of the final and accepted loan approval as issued by the Financier.

📎 Please attach evidence of funds if self funded.

SECTION 3. DEVELOPMENT AND CONSTRUCTION/TYPE

Description of the development (e.g. Six new freestanding double storey brick veneer townhouses with slate roof and double garage).

New development? ☐ No ☐ Yes

AND/OR

Renovation/Refurbishment of an existing building? ☐ No ☐ Yes ➔ Please provide details:

Is this part of a staged construction?

☐ No ☐ Yes ➔ Please provide details:

What stage? How many stages are there?

Will any pre-existing buildings remain on the site following the completion of this contract?

☐ No ☐ Yes ➔ Please provide details:

Has construction commenced? ☐ No ☐ Yes

Will any part of the development (including landscaping) be constructed under another contract?

☐ No ☐ Yes ➔ Please provide details:

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Number of residential levels:

Number of residential units total:

Number of parking levels:

Above ground: Below ground:

Lifts: ☐ No ☐ Yes

SECTION 4. SITE LOCATION AND LOT VALUE DETAILS

For 2b and 2c, please complete for EACH dwelling on the site. If there are more than the space available below, please attach this information for all units.

[illegible]


SECTION 5. INFORMATION CHECKLIST AND FURTHER DISCLOSURES

The following information/documentation must accompany this application:

- ☐ Copy of executed Building Contract. *Note: If the building contract hasn't yet been executed, you must provide the requested documents within 7 days of the building contract being signed.*
- ☐ Site plans and ground floor plans.

For 2c you will also need to supply the following:

- ☐ Evidence of ownership (subject property must be in the same name as the Developer e.g copy of Rates Notice or copy of signed Transfer of Land if ownership has not yet been registered, or a copy of the signed Contract of Sale if settlement has not yet been effected).
- ☐ Final Terms and Conditions/ Letter of Offer from the Financier.
- ☐ Evidence of available funds if the project is to be fully or partially self funded.

 This section must be completed by the Registered Building Practitioner who is a director or partner of the Applicant; or the Applicant if you are a sole trader and a Registered Building Practitioner; or a person who has been nominated by the Applicant to complete this application on its behalf by way of execution of the QBE/VMIA Nomination and Authority form.

Has there been a change to any of the directors or partners of the Applicant who are registered building practitioners since the Applicant applied for eligibility for domestic building insurance?

☐ No ☐ Yes ➔ Please provide details:

Have you become aware of any circumstance since the Applicant applied for eligibility for DBI insurance that may give rise to a claim against you or the Applicant in respect of any domestic building work?

☐ No ☐ Yes ➔ Please provide details:

Has the building licence/registration of any directors or partners of the Applicant who are building practitioners – or, if the Applicant is a sole trader, has your registration as a building practitioner been cancelled, suspended or varied since the Applicant applied for eligibility for domestic building insurance?

☐ No ☐ Yes ➔ Please provide details:

Is there any further information or matter of a material nature not otherwise disclosed in this application that:

- could significantly affect the financial position of you or the Applicant?
- might influence QBE's acceptance of this application on behalf of the VMIA or the terms upon which the application is accepted?
- might influence QBE's decision to issue domestic building insurance on behalf of the VMIA to the Applicant?

☐ No ☐ Yes ➔ Please detail further information or relevant matters:

SECTION 6. APPLICANT'S DECLARATION

! This section must be completed a Registered Building Practitioner who is a director or partner of the Applicant; **OR** the Applicant if you are a sole trader and a Registered Building Practitioner; **OR** a person who has been nominated by the Applicant to complete this application on its behalf by way of execution of the QBE/VMIA Nomination and Authority form.

I acknowledge that:

- QBE and the VMIA have the right to decline any Application for a Job Specific Multiple Building Works policy.
- QBE and the VMIA reserve the right at all times to seek additional information from the builder and all other parties to this application.
- The details provided in this application are true and correct.
- At the date of signing of this application, the Applicant is solvent.
- For certificates of insurance issued on or after 1 July 2015, in addition to cover provided in accordance with the Ministerial Order, the owner is also entitled to make a claim if the Applicant fails to comply with a Tribunal or Court Order.

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 claims and credit history.

1. Declared by (name):

Position/title:

For and on behalf of
(name of Applicant entity):

Signature:

Date: / /

2. Declared by (name):

Position/title:

For and on behalf of
(name of Applicant entity):

Signature:

Date: / /

3. Declared by (name):

Position/title:

For and on behalf of
(name of Applicant entity):

Signature:

Date: / /

4. Declared by (name):

Position/title:

For and on behalf of
(name of Applicant entity):

Signature:

Date: / /