1. BROKER DE	TAILS		3. TYPE O	F OWNER-BU	ILDER WORK co	ont'd		
Broker Name:		Provide a detailed description of Owner Builder work (e.g.: construction of two storey dwelling with garage)						
Broking Firm:								
Address:			Floor area of pr	oject:	m2			
				3				
Suburb:		Replacement cost of work @ current day rates \$						
Suburo.			Replacement co	ost of swimming	pool @ current day	rates \$		
State: Postcode:			Approximate date of completion of the work					
Phone:		(N.B. The replacement cost should reflect the price a licensed builder would charge today to do all the work which is now being insured)						
Fax:			4. DETAILS OF CONTRACTORS WHO CARRIED OUT WORKS GREATER THAN \$16,000					
Email:			Type of Work	name	address	licence no.		
2. DETAILS OF	THE INSURED		Bricklayer (if used and available)					
Owner Builder Details	s:		Carpenter (if used and available)					
Trading Name:								
Current Residential Ad	ldress:		Plasterer (if used and available)					
State:	Postcode:		5. APPLICA	ANT HISTOR	Y			
Phone:	Email:			Have you at any time ever been refused or declined Builders Warranty Insurance? Yes No				
Property for Sale Address:			Have you purchased Builders Warranty Insurance as an Owner Builder within the last five years? Yes No					
Flat/Unit No:	Unit No:	Lot No:	Have you ever he registration?	eld a builders/co	ntractor licence or	Yes No		
	Olit 140.	Lot 140.	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					
Street:			Is there any relationship between the Owner Builder and the Purchaser? Yes No			Yes No		
State:	Postcode:		into a deed of a subject to a legal			Yes No		
Identify the type of w	WNER-BUILDER W ork to be insured. For eas of work e.g.: Garag 6.	example, if the work	If you answered y	es to any of the al	pove questions please	supply full details		
3. Construction of4. Renovation of5. Completion of	of a Dwelling Extension of a Garage, Carport a Dwelling	y Other						

6. DECLARATION

This declaration must be completed and signed by or on behalf of all parties making this application.

- the answers and information given by me/us in this proposal are true and correct in all respects and that no information has been withheld which would affect Assetinsure's decision about accepting this insurance and where answers in this proposal are not my/our own handwriting, they have been checked by me/us and I/we agree they are correct
- ii. I/we have read and understood the clauses detailed under the Important Information in this proposal
- iii. if there was insufficient space to fully answer any questions, we have attached supplementary pages providing the additional information required
- iv. I/we authorise Assetinsure to give to, or obtain information from other insurers or an insurance or credit reference bureau, any information relating to these insurance covers, and any other insurances held by me/us and claims under those insurances
- I/we understand that if this Proposal is accepted the insurance cover will be subject to the terms and conditions set out in Assetinsure Owner Builder Warranty Insurance Policy
- vi. I/we further acknowledge that Assetinsure, their agents or employees reserve the right to decline this proposal
- vii. I/we acknowledge that on issuance of an individual Owner Builder Warranty Certificate it is the purchaser and the successors in title to the purchaser who is the Insured and not me/us as the Applicant/Owner Builder
- viii. I/we confirm that the information contained in this application is true and correct
- ix. I/we have read and understood the terms and conditions of the Financ ial
- x. By providing this information and signing this form, you confirm you have the consent of the alternate contact to provide their name and for them to provide your current details if Assetinsure cannot reach you at your usual address

Applicants

Signature:					
Print Name:		Date:	/	/	
Signature:					
Print Name:		Date:	/	/	
Please supply a future forwarding					
Address:					
Alternate Contact (Optional):					
Name:	Phone:				
Address:					

(to be used only when contact cannot be made with you at your usual address)

Australian Owner Builders Insurance Services Ptv Ltd

ABN 95 431 654 AFSL 308 705

Suite 3, 5-7 Peninsula Boulevard

Seaford VIC 3198

Telephone: 1300 850 131

Email: underwriter@aobis.com.au

THIS PRODUCT IS ISSUED BY Assetinsure Pty Ltd ABN 65 066 463 803

7. DOCUMENT CHECKLIST

To avoid delays with processing your Warranty Insurance Proposal, use this checklist to ensure you include all the required documentation.

- Arrange a 137B inspection/defects report and attach copy (To engage an accredited inspector see www.aobis.com.au)
- Owner Builder to complete and sign proposal form
- Attach a copy of the building permit
- Attach a copy of the Certificate of Occupancy or Final Inspection Certificate
- Copy of Driver's Licence of Owner Builder

8. IMPORTANT INFORMATION

This policy is subject to The Insurance Contracts Act 1984. Under that Act you have a Duty of Disclosure.

Before you take out insurance with us you have a duty to tell us of everything that you know, or could reasonably be expected to know, that is relevant to our decision to insure you and to the terms of that insurance. If you are not sure whether something is relevant you should inform us anyway. You have this duty until we agree to insure you.

You have the same legal duty to inform us of those things before you renew, extend, vary, or reinstate your contract of general insurance.

Your duty however does not require disclosure of things that:

- reduce the risk
- are common knowledge
- we know or, in the ordinary course of our business, ought to know, or
- · we have indicated we do not want to know.

If you do not comply with your Duty of Disclosure, we may be entitled to:

- · reduce our liability for any claim
- cancel the contract
- refuse to pay the claim
- avoid the contract from its beginning, if your non-disclosure was fraudulent

Privacy Statement

Assetinsure respects your privacy and operates at all times in accordance with its Privacy Policy. Any personal information provided by you will be treated in accordance with the *Privacy Act 1988* (Cth). This privacy notification provides a summary of how Assetinsure treats your personal information, and it is recommended that you read Assetinsure's Privacy Policy in conjunction with this notice.

Assetinsure primarily collects your personal information via this form to assess your request for insurance and to administer your policy but may also use this information to settle an insurance claim, provide other insurance services as requested by you, and also to notify you about other Assetinsure services or promotions from time

If you do not provide the information requested you may breach your Duty of Disclosure, your application may not be capable of being accepted, additional conditions may be imposed on any cover provided or Assetinsure may not be able to administer your policy.

In order to provide its insurance services Assetinsure may need to disclose your personal information to third parties including, but not limited to: agents, underwriters, advisors and brokers; claims management and other service providers; claims adjustors, loss assessors and other claims investigators; lawyers; reinsurers and reinsurance brokers; or as required by law (for a full list see Assetinsure's Privacy Policy). In the event of a claim, Assetinsure may disclose your personal information (including sensitive information) to overseas reinsurers for the purpose of assessing your claim. Assetinsure will only share information with third parties where Assetinsure reasonably believes it is necessary in assessing your insurance claim and in providing the products and services requested.

In accordance with Assetinsure's Privacy Policy, you may obtain access at any time to personal information that Assetinsure or its service providers hold on you. Assetinsure's Privacy Policy contains information about how to access and correct the personal information Assetinsure holds on you and also how to complain about a breach of privacy. If you would like additional information about privacy or would like to obtain a copy of the Privacy Policy, please contact Assetinsure's Privacy Officer by:

Online at:

http://www.assetinsure.com.au/ssl/cms/files_cms/AIPrivacyPolicy.pdf By phone on: 02 8274 2898

By email to: privacy@assetinsure.com.au

By letter to the Privacy Manager at: Assetinsure, 45 Clarence Street, Sydney, NSW 2000

In signing this form, you expressly consent to us using your personal information in accordance with our Privacy Policy. You can also download a copy of Assetinsure's Privacy Policy by visiting www.Assetinsure.com.au/docs/PrivacyPolicy.pdf