

## Builders Warranty Claim Form

### IMPORTANT NOTICES

#### About the Insurer

This insurance is underwritten by Great Lakes Reinsurance (UK) SE (ARBN 127 740 532, ABN 18 964 580 576, AFSL 318603) trading as Great Lakes Australia ('Great Lakes Australia'). Great Lakes Australia is an authorised Australian insurer, regulated by the Australian Prudential Regulation Authority ('APRA'). Great Lakes Australia is a branch office of Great Lakes Reinsurance (UK) SE, a limited liability company incorporated in England and Wales and a wholly owned subsidiary of Münchener Rückversicherungs-Gesellschaft AG ('Munich Re'), part of Munich Re (Group).

#### The Agent

Residential Builders Underwriting Agency Pty Ltd (ABN 55 604 481 521, AFSL 477528) ('RBUA') arranges policies for and on behalf of Great Lakes Australia. RBUA acts under a binding authority given to it by the insurer to administer and issue policies, alterations and renewals. In all aspects of arranging this Policy, RBUA acts as an agent for the insurer and not for you.

#### General Insurance Code of Practice

Great Lakes Australia is a signatory to the General Insurance Code of Practice (the Code). The Code aims to raise standards of service between insurers and their customers. Great Lakes Australia's service standards are in accordance with the Code.

For any information about the Code, including a copy of the Code, contact us or the Financial Ombudsman Service Australia on 1800 367 287 or visit [www.codeofpractice.com.au](http://www.codeofpractice.com.au)

#### Duty of Disclosure

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 be reasonably 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 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 need 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 found to be fraudulent.

#### Privacy

Both Great Lakes Australia and RBUA respect your privacy. 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 Great Lakes Australia and RBUA treat your personal information.

Great Lakes Australia and RBUA primarily collect 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 services or promotions from time to 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 your Policy may not be able to be administered.

In order to provide its insurance services Great Lakes Australia and RBUA 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 adjusters, loss assessors and other claims investigators; lawyers; reinsurers and reinsurance brokers; and the Financial Ombudsman Service, some of whom may be located in overseas countries, or as required by law (for a full list see Great Lakes Australia's and RBUA's Privacy Policy). In the event of a claim, Great Lakes Australia and RBUA may disclose your personal information (including sensitive information) to overseas reinsurers for the

purpose of assessing your claim. Great Lakes Australia and RBUA will only share information with third parties where Great Lakes Australia and RBUA reasonably believe it is necessary in assessing your insurance claim and in providing the products and services requested.

Great Lakes Australia's and RBUA's Privacy Policy contains information about how to access and correct the personal information about you and also how to complain about a breach of privacy. If you require additional information or would like a copy of our privacy policies, our privacy officer's contact details are:

For Great Lakes Australia

**Mail:** Munich Re Australia, PO Box H35, Australia Square NSW 1215 Australia

**Email:** [privacyofficer@munichre.com](mailto:privacyofficer@munichre.com)

**Call:** 02 9272 8000

For RBUA

**Mail:** Steadfast Underwriting Agencies, P O Box A2016 Sydney South NSW 1235

**Email:** [privacyofficer@steadfastagencies.com.au](mailto:privacyofficer@steadfastagencies.com.au)

**Call:** 02 9495 6500

## GST and Insurance Requirements

If you are registered for GST purposes and have an entitlement to claim an Input Tax Credit (ITC) for GST paid on your insurance, you are required to inform your insurer, at or before the time of any subsequent claim, of the extent to which you are eligible to claim an ITC.

The amount that we are liable to pay under this Policy will be reduced by the amount of any input tax credit that you are or may be entitled to claim for the supply of goods or services covered by that payment.

If you are liable to pay an excess under this Policy, the amount payable will be calculated after deduction of any input tax credit that you are or may be entitled to claim on payment of the excess.

## Dispute Resolution Process

If you think we have let you down in any way, or our service is not what you expect (even if through one of our representatives), please tell us, so we can help. We are committed to resolving your complaint fairly.

If you have a complaint, contact us by:

- **Tel:** 02 9272 2157
- **Email:** [disputes@gla.com.au](mailto:disputes@gla.com.au)
- **Mail:** Great Lakes Australia, PO Box H35, Australia Square, Sydney, NSW 1215

Please refer to your Policy for full details of our Dispute Resolution Process.

Policy No: \_\_\_\_\_ Claim Number: \_\_\_\_\_

**Section 1** **Owner Details**

Name of all current owners (from property title) \_\_\_\_\_

Dwelling address: \_\_\_\_\_

Postal address: (if different from above) \_\_\_\_\_

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

Are you entitled to claim Input Tax Credits with regards to the subject matter of this claim? Yes  No

If yes, please provide ABN Number and percentage entitlement to an input tax credit for the subject matter of this claim: \_\_\_\_\_ % ABN: \_\_\_\_\_

What is your percentage entitlement to an input tax credit for the GST payable on the premium for this Policy? \_\_\_\_\_ %

**Section 2** **Builder Details**

Name of Builder: \_\_\_\_\_

Registration/Licence Number: \_\_\_\_\_

Builder's Current Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Section 3** **Claim Type**

**1. Insolvency**

Is the Builder insolvent/bankrupt/in external administration? Yes  No

If yes, please provide details: \_\_\_\_\_

How and when did you become aware of the Builder's financial situation?

Please provide details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 3**

**Claim Type (cont'd)**

Have you been officially notified of the Builder's financial situation? If so, please provide a copy of the notice if official notification of insolvency provided. Yes  No

**2. Deceased Builder**

Has the Builder died? Yes  No

If yes, please provide details:

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How and when did you become aware of the builders death? Please provide details:

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Have you received any formal notification? Yes  No

[Please provide a copy of any notice received.](#)

**3. Disappearance**

Has the Builder disappeared? Yes  No

How and when did you become aware of the Builder disappearance?

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What evidence do you have that the Builder has disappeared? Please provide details:

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What measures have you taken to locate the Builder? Please provide details:

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**Section 4**

**Contract Issues - Original Owner**

Has the building work started? Date started:        /    / Yes  No

Has the building work been completed? Date completed:    /    / Yes  No

Has a certificate of occupancy or completion been issued? Date issued:        /    / Yes  No

Did the Builder design the work in the building work contract? Yes  No

If no, who did design the building? \_\_\_\_\_

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**Section 4**

**Contract Issues - Original Owner (cont'd)**

Did you design the work in the building work contract? Yes  No

Are you a developer of the work in the building work contract? Yes  No

Are you a related company to the Builder or developer in the building work contract? Yes  No

Please provide details: \_\_\_\_\_

\_\_\_\_\_

Have you paid all monies due as per the contract of all work done to date, including any variations and/or extras? Yes  No

Amount unpaid? \$ \_\_\_\_\_

Have you paid any amounts in advance of the amounts called for as identified in the building work contract? Yes  No

Please provide details of over payment: \_\_\_\_\_

\_\_\_\_\_

Stage of work completed: \_\_\_\_\_

Stage of work paid for: \_\_\_\_\_

Total payments made: \$ \_\_\_\_\_

Do you possess any building or consultants reports to substantiate your claim? Yes  No

Please provide details: \_\_\_\_\_

\_\_\_\_\_

Are any of the claimed items part of the variations of the work in the building work contract? Yes  No

Please provide details: \_\_\_\_\_

\_\_\_\_\_

Have you terminated the building work contract? Date terminated:        /        /        Yes  No

**Section 5**

**Contract Issues - Subsequent Owner**

If you purchased the completed dwelling, were you aware of any defect/s prior to or during the purchase process? Yes  No

Please provide details: \_\_\_\_\_

\_\_\_\_\_

Was a pre-purchase inspection report obtained? If yes, please provide a copy of the report. Yes  No

Was the vendor an owner builder? If yes, please provide a copy of the Owner Builder Report Yes  No

When did you first become aware of the defects? Please provide details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 6**

**Contract Issues - General**

Has the defect/s deteriorated since you first became aware of its existence? Yes  No

If yes, please provide details:

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Did you take reasonable and timely steps to minimise the damage? Yes  No

If yes, please provide details:

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Are you aware of any past or current court or legal actions concerning the dwelling? Yes  No

If yes, please attach all relevant documentation and list of full details:

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Have any complaints been previously lodged or claims made in relation to the building work? Yes  No

If yes, please provide details;

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Were any of the items of the claim known to you before the date of completion of the work in the building work contract or when you purchased the dwelling or before you purchased the completed dwelling? Yes  No

If yes, please provide details:

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Are you represented by a solicitor? If yes, please provide details: Yes  No

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Are you the builder named in the building work contract? Yes  No



## Declaration

I declare that to the best of my knowledge and belief the information in this form is true and correct and I understand the claim may be refused or reduced if information is withheld.

I understand that I may have to provide relevant documentation to enable complete consideration of my claim.

I consent to RBUA and Great Lakes Australia using the personal information I have provided on this form for the purposes of processing my claim. I consent to the disclosure of any personal information (including sensitive information) to third parties and overseas where it is reasonably necessary for the purposes of processing my claim. I understand that if this consent is not given RBUA and Great Lakes Australia will not be able to process my claim.

Signature of insured or person with authority to sign for and on behalf of a company or partnership.

Signature: \_\_\_\_\_ Date:        /        /

Please indicate the number of additional pages attached to this claim form: \_\_\_\_\_

### Documentation to be submitted with this claim

Original Owner	Subsequent Owner
<input type="checkbox"/> Copy of Certificate of Insurance	<input type="checkbox"/> Copy of Certificate of Insurance
<input type="checkbox"/> Copy of Certificate of Title of the Property	<input type="checkbox"/> Copy of Certificate of Title for the property
<input type="checkbox"/> Copy of dated and signed Building Warranty Contract applicable to the works	<input type="checkbox"/> Copy of the Purchase Contract
<input type="checkbox"/> Copy of the written agreed Variations to the Building Works Contract	<input type="checkbox"/> Copy of Owner Builder application and Defect Report if applicable
<input type="checkbox"/> Copy of Building Specifications and Schedule for the works	<input type="checkbox"/> Copy of the pre-Purchase Inspection Report
<input type="checkbox"/> Copy of all Certified Building Permit Drawings	
<input type="checkbox"/> Copy of all Building Inspection Reports issued by the permit authority	
<input type="checkbox"/> Copy of Certificate of Completion or Certificate of Occupancy issued by the permit authority	
<input type="checkbox"/> Copy of all documentary evidence of payments made to the builder	
<input type="checkbox"/> Copy of any bank authorisation of progress payments	
<input type="checkbox"/> Copy of any Defects List prepared and provided to the builder	