

Project Application Form

Pool Warranty Insurance



Please complete in block/capital letters.

Builder details

Name of Builder: (must be as per building contract and builder licence)

Registered Trading Name of Builder: (if applicable)

Builder's Licence No:

Builder's Office Address: (location address – not post box address)

ABN:

Contact Name:

Phone:

Fax:

Mobile:

Owner details

Name of Owner: (Include full names of all owner(s) as per contract)

Phone:

Present Address:

Post Code:

Is there any Family or Business (other than contractual) relationship between Builder and Owner?: (x)

Yes

No

If Yes, please give details:

Site location

Unit Number: (if applicable)

Lot Number: (if applicable) or;

Street Number:

Address:

Postcode:

Certification: (if Private Certifier, insert name - if Local Council, insert name of Council)

Address of Certifier/ Local Council:

Postcode:

continued overleaf

Contract details and value (pool warranty insurance only applies to projects above \$12,000 value)

Fixed Price / Lump sum Contract – Contract price (Including GST): \$

Construction Period Estimated Start Date: /

Estimated Completion Date: /

Date Building Contract Signed: /

Note: Please use the above value, to ascertain the premium payable for this project, from the rate chart supplied.

Builder's declaration

I/we hereby declare that I/we have not withheld any information likely to effect Caliden's decision to accept this insurance and further; that if I/we pay the premium for the owner's insurance I/we have done so for the owner:

Name:

Signed:

Date: /

Payment of premium

Methods of Payment:

1. By Cheque, payable to Austcover Pty Ltd.
2. By Electronic Transfer – Payment electronically deposited into our bank account.
Transacted on same day quoting our Client Reference Number and owner's name.
3. By credit card. Please note that only Visa, Mastercard and Bankcard can be accepted. We regret that a Credit Card surcharge applies as Austcover is not the insurance provider. The Credit Card Surcharge covers merchant fees and additional administration costs incurred by Austcover. The Credit Card surcharge is shown in your Rate Chart and should be added to the premium, if using a Credit Card. If so, please complete details as shown below.

Credit Card Details: (x)

Visa Mastercard Bankcard

Card Number:

Expiry Date: /

Amount Authorised: (include Credit Card Surcharge)

Name on Card:

Signed:

Date: /

If Victorian Builder, Mail or Fax to:

675 Victoria Street (PO Box 3003 Victoria Gardens) Richmond Victoria 3121

Phone: (03) 9425 1333 Fax: (03) 9425 1399

If New South Wales Builder, Mail or Fax to:

65 Walker Street (PO Box 1155 North Sydney) New South Wales 2059

Phone: (02) 9955 5100 Fax: (02) 9954 1479

AUSTCOVER

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