

HOME WARRANTY

INSURANCE CLAIM FORM

**Please read this page and the policy booklet before you complete the application.
Keep this page and the policy booklet so you can refer to them again.**

ABOUT YOUR CLAIM

CGU Home Warranty Insurance policies provide for CGU, at its discretion to;

- arrange for the satisfactory completion and/or rectification of the work to the standard and specifications outlined in the contract; or;
- pay to you a sum of money as determined by CGU to be fair and reasonable to permit you to carry out the necessary completion and/or rectification of the work.

Where work is arranged, CGU will require documentary evidence that the work has been carried out satisfactorily and may carry out inspections where deemed necessary.

If we elect to pay you an agreed sum of money you will be required to enter into a contract with an appropriately licensed/registered Builder/Contractor, who must provide Home Warranty Insurance to cover the proposed completion/rectification work, if necessary.

We will advise you how we will settle your claim.

We may appoint a technical consultant(s) to carry out site inspection(s) and require you to provide necessary documentation before we authorise and pay for necessary completion and/or rectification work.

If we require more information we will contact you.

DO NOT AUTHORISE COMPLETION/RECTIFICATION WORKS YOURSELF

You must not negotiate or settle any claims for losses or damage, or incur any costs or expenses without first obtaining our consent in writing. However, any temporary/emergency repairs necessary to prevent further damage may be carried out immediately and all reasonable costs will be reimbursed, subject to liability.

If you have any questions about your claim please contact CGU Home Warranty Insurance on 131 026.

YOUR DUTY OF DISCLOSURE

You have certain disclosure obligations that you must comply with.

WHAT YOU MUST TELL US

When answering our questions, you must be honest and you have a duty under law to tell us anything known to you, and which a reasonable person in the circumstances, would include in answer to the questions. We will use the answers in deciding whether we are obliged to pay a claim.

IF YOU DO NOT TELL US

If you do not answer our questions in this way, we may reduce or refuse to pay a claim. If you answer our questions fraudulently, we may refuse to pay a claim.

HOW CGU PROTECTS YOUR PRIVACY

We use information provided by our customers to allow us to offer our products and services. This means we may need to collect your personal information, and sometimes sensitive information about you as well (for example, health information for travel insurance). We will collect this information directly from you where possible, but there may be occasions when we collect this information from someone else.

CGU will only use your information for the purposes for which it was collected, other related purposes and as permitted or required by law. You may choose not to give us your information, but this may affect our ability to provide you with insurance cover.

We may share this information with companies within our group, government and law enforcement bodies if required by law and others who provide services to us or on our behalf, some of which may be located outside of Australia.

For more details on how we collect, store, use and disclose your information, please read our Privacy Policy located at www.cgu.com.au/privacy. Alternatively, contact us at privacy@cgu.com.au or 13 24 81 and we will send you a copy. We recommend that you obtain a copy of this policy and read it carefully.

By applying for, using or renewing any of our products or services, or providing us with your information, you agree to this information being collected, held, used and disclosed as set out in this policy.

Our Privacy Policy also contains information about how you can access and seek correction of your information, complain about a breach of the privacy law, and how we will deal with your complaint.

HOW YOU CAN RESOLVE A DISPUTE WITH US

1. Please advise the staff at CGU Home Warranty Insurance if you are dissatisfied with:
 - our decision on your claim;
 - our handling of your claim; or;
 - the services of our technical consultant.
2. The staff member will try to resolve the problem.
3. If unable to resolve it, the staff member will refer it to the supervisor or manager for attention. A decision concerning your complaint will be made within 15 business days of receipt.
4. If this fails to resolve your problem, you may request that the problem be referred to our internal dispute resolution staff. They will investigate the dispute and try to reach a satisfactory outcome with you, normally within 15 business days of the date you requested the referral.

5. If you do not accept our decision, you may lodge an appeal to:

NSW **NSW Civil and Administrative Tribunal**
on **1300 135 399**

VIC **Victorian Civil and Administrative Tribunal**
on **03 9628 9999**

WA **State Administrative Tribunal**
on **08 9219 3111**

SA **Consumer and Business Services**
on **131 882**

TAS **Consumer Affairs and Fair Trading**
on **1300 654 499**

ACT **Fair Trading**
on **02 6207 3000**

(Only where the Builder/Contractor is insolvent, has died, or has disappeared)

CGU Insurance Limited ABN 27 004 478 371

Please answer all questions. This will help us to process your application quickly. If you need more space to answer any of the questions, please use a separate sheet of paper. Any attachments will form part of this application and the declaration will include them.

CGU Home Warranty Insurance Policy Number

Have you previously lodged a Notification of Loss Form with CGU Home Warranty Insurance? Yes No

Please provide your notification number

Section 1 – Claimant(s) details

Individuals must give their full name(s). Companies must give their company name and ACN. Owners Corporations must give the Strata Plan Number and identify the affected lot numbers.

Surname/Company Name/Strata Plan Number Given name(s)/Representative's name

Email address

Postal address Postcode

Home telephone no. Daytime telephone no.

Mobile no. Facsimile no.

Section 2 – Address of residential building work (the subject of the claim)

Lot no. Street no. Street/road name

Suburb/town Council Postcode

Section 3 – Are you registered for GST purposes?

No Yes

Are you entitled to claim an input tax credit on the GST component applicable to this policy?

No Yes Is the amount less than 100% of the GST applicable to the premium? No Yes Please specify the percentage %

Where payment is made under this policy we will reduce the amount of the payment by the amount that you are entitled to under A New Tax System (Goods and Services Tax) Act 1999.

Section 4 – Builder/Contractor

Name of Builder/Contractor

Licence/Registration number

Email address

Postal address (last known)

Home telephone no.

Daytime telephone no.

Mobile no.

Facsimile no.

1. Has the Builder/Contractor died, disappeared, been declared insolvent or had their building licence suspended? (licence suspension relates only to NSW policies issued from 19 May 2009.)

No Yes Please state when & provide details.

2. If the Builder/Contractor has disappeared, what attempts have been made to locate the Builder/Contractor?

3. What was the completion date of the residential building work?

(Please provide details e.g. completion certificate, occupancy certificate, or other)

4. Did you contract directly with the Builder/Contractor?

No Please complete sections 5, 8 and 9.

Yes Please complete sections 6, 7, 8 and 9.

Date of Contract

Section 5 – Details of property purchase

1. What was the date of purchase?

2. What was the purchase price?

3. Did you obtain a pre-purchase inspection report?

No Yes Please provide a copy.

4. Were you aware of any building defects/incomplete work at the time of your purchase?

No Yes Please provide details.

5. Do you still own the residence the subject of your claim?

No Yes

Section 6 – Details of building Contract

1. Was the contract terminated?

No Yes Please provide details including a copy of all correspondence/documentation evidencing the termination.

2. If the residential building works are not complete, what is the date the Builder/Contractor last attended the site?

/ /

3. Were plans and specifications required for the residential building work?

No Yes Please provide a full copy.

4. Who supplied the plans and specifications? (e.g. Builder/Contractor, you or your representative(s), prior owner)

5. Was the contract for residential building work in writing?

No Yes Please provide a full copy.

6. Contract Sum \$

Variations \$

\$

\$

\$

\$

\$

Total Contract \$

Please provide a copy of all documentation evidencing agreed variations

Section 7 – Payments

Please provide details of all payments to the builder/contractor. Evidence of payment is required. Evidence can be in the form of bank statements, receipts, copy cheques, etc.

Date Paid	Payment for stage/variation no.	Payment method	Amount Paid
<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"/>
<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"/>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Total of payment			\$ <input type="text"/>

Builder/Contractor

1. Is there a retention fund?

No Yes Please provide details of the financial institution holding the fund and the balance immediately following the last deposit.

2. Is there still money owing under the original contract?

No Yes

How much is owing?

When was it due for payment?

 / /

Why was it not paid?

Section 8 – Details of Claim

1. Have you previously notified the Builder/Contractor of defective/incomplete residential building work?

No Yes

Please provide dates of notification and details of the items. What further action have you taken?

2. Please provide a copy of all correspondence entered into between you and the Builder/Contractor regarding the matter.

3. Precisely what is your claim?

Please list all items which form the subject of your claim and describe as best you can the cause of each item. Please state when you first noticed each item.

Date Noticed	Item/cause	Cost
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>		\$
Total amount being claimed		\$

Please provide a copy of any Consultant's report you have obtained in relation to the matter.

4. Have you previously claimed under any insurance policy, contract performance agreement or any other agreement in relation to the loss or damage to the residential building work the subject of the claim?

No Yes

Please state when & provide details.

Section 9 – Other proceedings

1. Have any proceedings been commenced or concluded in relation to the subject matter of this claim resulting in, or likely to result in, settlement with the Builder/Contractor, an arbitration award, an award by a tribunal or a judgement of any court.

No Yes

Please state when & provide details.

Declaration: This panel MUST be completed by the claimant(s)

1. I/We declare that:

- a. To the best of my/our knowledge and belief the information provided herein is true and correct in every respect and I/we have not withheld any relevant information.
- b. I/we agree that, by submitting this form, the personal information I/we provide to CGU Insurance Limited in this form or otherwise may be collected, held, used and disclosed in the manner set out in the CGU Privacy Policy found at www.cgu.com.au/privacy, including for processing this claim.
- c. I/We shall provide whatever information and assistance CGU may reasonably require to investigate the claim, determine its liability under the policy and allow it to complete/rectify the residential building work if so determines at its discretion.

Signature of Claimant 1

Signature of Claimant 2

On completion of this form, please print and sign. When ready, please return the form and additional documentation to CGU Claims via mail, fax or e-mail.

Date

Date

Please indicate the number of additional pages attached to this application

**When complete, please forward the claim to:
CGU Home Warranty Insurance
GPO Box 244
Sydney NSW 2001
home.warranty@cgu.com.au
Tel 131 026**

Important checklist

Claims will not be processed until all requested documentation has been supplied. Complete the checklist below to ensure you have supplied all requested documentation. You should keep copies of all documentation supplied to CGU.

For claims where you contracted with the builder/contractor:

- A complete copy of the contract relating to the building work, which is the subject of the claim
- A copy of your CGU Home Warranty Certificate
- A complete copy of the plans and specifications relating to the building work
- A complete copy of the conditions of approval as specified by your approving authority
- A copy of all certificates issued in relation to the construction of the dwelling
- A copy of all documents evidencing agreed variations or deductions
- Proof of payments made under the original contract
- Proof of termination of contract (if applicable)
- A copy of any Judgments relating to this matter by any Tribunal or Court
- A copy of any consultants report you have obtained in relation to the matter
- A copy of any correspondence entered into between you and the contractor regarding this matter

For claims where you purchased the residence, the subject of the claim:

- A copy of your CGU Home Warranty Certificate
- A complete copy of the Contract for Sale of Land through which you purchased the residence
- A complete copy of any pre-purchase inspection report or the like obtained prior to the purchase of the property

NOTE

The issue and acceptance of this claim form does not imply any admission of liability on behalf of CGU.

CGU reserves the right to request any further additional information it deems necessary to determine your claim.

All information and documentation supplied to CGU will be used to determine the validity of your claim.

CGU reserves the right to commence legal action against any person who supplies false or misleading information in connection with a claim, regardless of whether the claim is subsequently approved or declined.



Insurer
CGU Insurance Limited
ABN 27 004 478 371
AFSL 238291