



# Application for Home Insurance



Building Policy Number

**Completing this form**

Before you begin your application, please read the *Statement of Conditions*. If you don't already have this document, or if you have any questions about it, please ring **1300 552 662**. If you **need more space** to answer questions, or if you need to tell us additional information, please use the space on page 8 or provide an attachment with the required details.

**Eligibility for DSH Insurance**

Your answers to questions 4, 5, 6,7 and 8 will help us assess if you are eligible to use the Insurance Scheme.

**Disclaimer:** *Eligibility to insure with the Defence Service Homes Insurance Scheme does not guarantee entitlement to assistance under the Defence Home Ownership Assistance Scheme.*

**Duty of disclosure**

**What you must tell us:** When answering the questions on this form, 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 to insure you, and on what terms.

**Who needs to tell us:** It is important that you understand you are answering our questions in this way for yourself and anyone else you want to be covered by the policy.

**If you do not tell us:** If you do not answer the questions in this way, we may reduce or refuse to pay a claim, or cancel the policy. If you answer the questions fraudulently, we may refuse to pay a claim and treat the policy as never having existed.

If you are not sure about the duty of disclosure requirements, please ring **1300 552 662**.

## SECTION A

## Personal details

**1 Details of the owners of the home to be insured**

If there are more than two owners please provide the additional details on a separate sheet.

Title Mr  Mrs  Miss  Ms  Other

Family name

Date of birth

Given name(s)

 /  / 

Title Mr  Mrs  Miss  Ms  Other

Family name

Date of birth

Given name(s)

 /  / 

**2 Postal address**

  
 POSTCODE

**3 Contact details**

Home (  )  Work (  )

Mobile  Fax (  )

E-mail

4 Are you entitled to a Defence (or War) Service Home Loan (whether used or not)? No  Yes

5 Do you receive or are you entitled to any pension or other benefit from DVA i.e. under the Veterans' Entitlements Act 1986 (including AASM qualifying service)? No  Yes

6 If you answered NO to questions 4 and 5 indicate if you (or, if you are widowed, your late spouse) served with the Australian Defence Force.

Area of eligible service  
Country


Dates

/ /	to	/ /
/ /	to	/ /
/ /	to	/ /
/ /	to	/ /
/ /	to	/ /

If insufficient space, please provide details on page 8

**You should only complete Question 7 if you were a serving member on or after 1/07/2008.**

7 Have you received a Certificate of Entitlement for assistance under the Defence Home Ownership Assistance Scheme Act (2008)?

Yes  ▶ Please go to Question 9.

No  ▶ (a) If you are a permanent ADF member:  
Were you serving on or after 1/07/2008? No  Yes

Have you completed four or more consecutive years of permanent service without a break of service? No  Yes

(b) If you are a Reserve member of the ADF:  
Have you completed 20 days reserve service in a financial year on a or after 1/07/2008? No  Yes

Have you completed eight consecutive years of effective reserve service (20 days in a financial year) without a break? No  Yes

(c) Did you on or after 1/07/2008 stop being a member of the ADF because of a compensable condition and not again become a member of the ADF? No  Yes

**If you answered "NO" to any of the above, you will need to contact DSHI so that eligibility for DSHIS entitlement can be assessed.**

8 Do you have a Defence HomeOwner loan on the home to be insured? No  Yes

**9 Do you have a mortgage?** No  Yes  ▶ Please provide details of lender

Name

Address

POSTCODE

Facsimile number

**10 Start date of this insurance**

**11 Have you had home insurance before?** No

Yes  ▶ Name of most recent home insurer

Expiry date of the previous insurance policy

**12 Have you, or anyone normally living with you, ever:** No  Yes  ▶ Please provide details. For example, *excess imposed by an insurance company in 2003 following theft claim.*

- been refused insurance
- been declined renewal of insurance
- been quoted an increased premium
- had any special terms or conditions imposed, or
- been declined renewal of insurance?


**13 In the last 5 years, have you, or anyone normally living with you, ever been charged or convicted of:** No  Yes  ▶ Please provide details including type of offence, year and amount  
For example, *fined \$500 in 2003 for shop stealing*

- arson or any offence involving actual or threatening damage to property
- any criminal act
- fraud
- theft
- drugs, or
- dishonesty of any kind?


**14 Have you, or anyone normally living with you, made an insurance claim in the last five years?** No  Yes  ▶ Please provide details including type of claim, year and amount  
For example, *storm claim approximately \$3,500 in 2003*


**15 Is there any other information that is relevant to our decision to insure your home?** No  Yes  ▶ Please provide details


**SECTION B****Home details****16 Address of home to be insured**

(if same as postal address, write 'SAME')

	POSTCODE
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**17 How is the home occupied** By you as owner By a tenant (living in your home) Holiday home Home is vacant (unoccupied for more than 90 days)

Other - give details

**18 Type of home** Freestanding house Home unit/Flat Townhouse/Terrace/Villa

Other - give details

**19 Is the home on acreage?**No Yes 

▶ Please provide area

**20 Is the home strata title?**No Yes 

▶ Is there Body Corporate Insurance?

No Yes **21 Construction details****Walls** Double brick Brick veneer Fibro Wood

Other - give details

**Roof** Tiles Colorbond Fibro Iron

Other - give details

**Year of construction**

**22 Does the home have any special features?**

For example, highset, more than one level, on stumps, modifications for elderly occupants

No Yes 

▶ Please provide details


**23 Is the home connected to town services (e.g. water, gas, electricity)?**No Yes 

▶ Please provide details

Yes 


**24 Is the home Council approved?**No Yes **25 Is the home heritage listed?**No Yes 

▶ Please provide details

**26 Is the home over 70 years old?**No Yes 

▶ Has it been:

• rewired?

No Yes 

▶ Year

• replumbed?

No Yes 

▶ Year

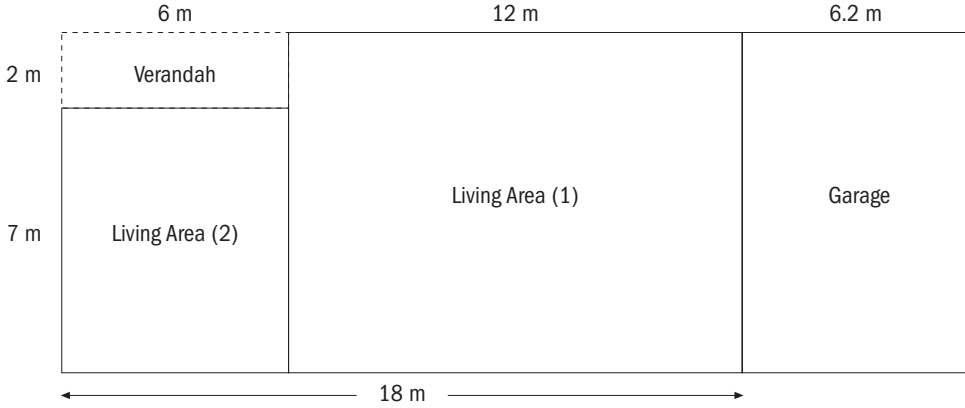


**34** If you do not have a plan of your home, please use the graph below to help you draw your floor plan.  
Please provide the measurements in square metres.

To calculate the floor area of your home in square metres:

- measure the length and width of the **outside** of the home in metres
- multiply the length by the width for each area of the home and add them together to get the total area.

Remember to include all levels of the home.



**Example** (based on the sketch plan)

Living area (1):  $12 \times 9 = 108.0$

Living area (2):  $7 \times 6 = 42.0$

Garage:  $9 \times 6.2 = 55.8$

Verandah:  $6 \times 2 = 12.0$

**Total** **217.8 sq mtrs**

**35 Declaration**

This declaration must be signed by all owners of the home to be insured


I declare that:

- I have received a copy of the *Statement of Conditions* and I agree to be bound by the terms and conditions contained in it.
- All answers and statements made in this application are true and accurate in every respect.
- No information has been withheld which is likely to affect the Defence Service Homes Insurance Scheme decision about accepting this application.
- I acknowledge that Defence Service Homes Insurance Scheme reserves the right to decline any insurance application.
- I authorise Defence Service Homes Insurance Scheme ABN 97 191 187 638 to give to, or obtain from, other insurers, insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance I have, including this completed application and my insurance claims history.



Date

/ /



Date

/ /

As part of our ongoing commitment of service to the Veteran Community, and to help ensure that other eligible Veterans don't miss out on their benefits, we would appreciate it if you would complete the following question.

**36 How did you become aware of your entitlement to DSH Insurance?**

Please tick all boxes that apply

- |                                                          |                                                                       |
|----------------------------------------------------------|-----------------------------------------------------------------------|
| I have had DSH Insurance before <input type="checkbox"/> | DVA mail out <input type="checkbox"/>                                 |
| DSH Insurance phone call <input type="checkbox"/>        | Vietnam Veterans' Counselling Service (VVCS) <input type="checkbox"/> |
| DSH Insurance mail out <input type="checkbox"/>          | Veterans' Advisory Network (VAN) <input type="checkbox"/>             |
| DSH Subsidy (loan) <input type="checkbox"/>              | Friend, neighbour or family <input type="checkbox"/>                  |
| DSH information talk <input type="checkbox"/>            | Transition seminar <input type="checkbox"/>                           |
| RSL <input type="checkbox"/>                             | DHOAS <input type="checkbox"/>                                        |

Other ex-service organisation  ▶ Please specify

Service newspaper or journal  ▶

Other  ▶

