

# Stamford Insurance Building Warranty Builder or Developer Registration Form



This is an application to become a Stamford Insurance Approved Builder or Developer. Once approved you will be able to arrange 10-year warranties on your residential projects as they arise and pass these on to your clients at completion.

Please return the completed form by email to [info@stamfordinsurance.co.nz](mailto:info@stamfordinsurance.co.nz).

## Technical Audit

Once we have approved your application in principle, we will usually then arrange a Technical Assessment to review your Company's operations, project type/size, staff experience and qualifications, and your quality assurance procedures, both at head office and at a typical site. This incurs a one-off fee of \$1750.00 plus GST. Once paid, we will instruct one of our assessors to contact you to arrange a mutually convenient appointment with you and/or your main contractor.

## About Stamford Insurance

Stamford Insurance is a Registered Financial Adviser and a leading provider of Insurance to the building industry. Since 2014 we have specialised in Building Warranty Insurance, also known as Latent Defects Insurance. Our policies offer New Zealanders the widest protection available against defects in design, materials or workmanship which arise within 10 years of completion, backed by the security of one of the World's leading insurers. Stamford is owned and managed by insurance professionals with many years' experience, and we are committed to delivering outstanding cover and service.

Our insurer is Pacific International Insurance Pty Ltd ("Pacific International").

## About Pacific International Insurance

Stamford issues policies on behalf of Pacific International Insurance Pty Ltd ("Pacific International"), an insurer licensed with the Reserve Bank of New Zealand.

Pacific International has been helping New Zealanders protect what is important to them for over 20 years and has a financial strength rating of 'B++ Good' from the rating agency AM Best.

All our Building Warranty Policies are also reinsured with one of the World's top 5 reinsurers, a specialist in Latent Defects Insurance, which has a financial strength rating of "A+ Superior" from AM Best.

The AM Best Company financial strength rating scale is:

<b>A++, A+ (Superior)</b>	<b>A, A- (Excellent)</b>
<b>B++, B+ (Good)</b>	<b>B, B- (Fair)</b>
<b>C++, C+ (Marginal)</b>	<b>C, C- (Weak)</b>
<b>D (Poor)</b>	<b>E (Under Regulatory Supervision)</b>



**Builder or Developer**

Our warranty is a policy of Insurance, and so you have a duty to disclose every matter you know, or could reasonably be expected to know, that a prudent insurer would want to take into account in deciding whether to provide the Insurance or not, and if so, on what terms.

Your duty does not require disclosure of a matter:

- that diminishes the risk to be insured;
- that is of common knowledge;
- that we know of or in the ordinary course of our business we ought to know;
- that we state to you that we do not want to know.

Company name

NZ Business Number

Contact name

Telephone Number

Email

**Type of Business**

Developer      Builder      Developer and Builder      Other

**Other – please provide details below**

**Industry Experience of all Directors/Key Employees (if more than 2, please attach CV’s if you prefer)**

Name

Address

Qualifications

Industry Experience

Name

Address

Qualifications

Industry Experience

**Have any of the team been involved in projects which had any warranty claims in the last 5 years? If yes, please give details:**

### Organisation & Structure

Including Partners / Directors, how many people are directly employed?

What percentage of your labour is sub-contracted?

### Projects

Number of units in the Last 12 months

Estimated number of units in the upcoming 12 months

Average Cost per unit?

Estimated Current Annual Turnover forecast?

Type of Construction you would build in an average year

Do you employ or hold an LBP? If YES, please enter LBP Number

If you are a Developer, please list the name(s) of the Main Contractor(s) who carry out the building work

### Previous Projects

Please provide information relating to your 4 largest projects in the last 3 years

Address

Address

Construction Cost

Construction Cost

Type

Type

Date completed

Date completed

Address

Address

Construction Cost

Construction Cost

Type

Type

Date completed

Date completed

### Work in Progress (submit a Work in Progress Schedule if you prefer)

Address

Address

Construction Cost

Construction Cost

Type

Type

Start date

Start date

**Declaration by the Insured** - have you or any Director, Partner or Principal:

Ever been refused property insurance or had any special terms imposed by any insurer?

Ever been convicted or is there any prosecution pending for any offence involving dishonesty of any kind?

Ever been involved with a house builder or construction company that has gone into liquidation in the past?

Are there any other material facts relevant to the Insurance that you think we should be made aware of?

Are you or any director of the applicant or an associated company also a director of any house building or construction company not referred to on this form?

If you have answered "yes" to any of the questions above, or are aware of any facts that might be relevant, please provide details below:

**Privacy Statement**

Stamford Insurance is committed to safeguarding your privacy and the confidentiality of your information. We will only request information from you which is relevant to the insurance being applied for and will only disclose that information to the insurers and other professionals who are working with us, and who will be similarly bound in confidentiality.

**Declaration by the Proposer**

I/we declare to the best of my/our knowledge, the information I/we have given is true, correct, and complete in every detail and I/we have not withheld any material fact.

I/we understand that the completion of this form does not bind us to effect Building Warranty Insurance with Stamford but agree that should the quotation be accepted, this proposal and the statements made herein shall form the basis of the contract between me/us and the Underwriter.

I am aware that the Privacy Act 1993 entitles me to have access to and request correction of this information.

Signed

Date

Name

**Contact us**  
 0800 927 0100  
 info@stamfordinsurance.co.nz  
 3/106 Bush Road, Rosedale, Auckland 0632  
 PO Box 305228, Triton Plaza, Auckland 0757

