

Letter of Appointment | (NSW)

To whom it may concern,

We appoint Insurance House Pty Ltd (Level 3, 100 Wellington Parade, East Melbourne, VIC 3002) to manage our Home Building Compensation Fund (HBCF) warranty insurance requirements effective from

I authorise our insurer(s) to supply Insurance House Pty Ltd (Level 3, 100 Wellington Parade, East Melbourne, VIC 3002) with all information they request regarding our insurances and claims history, and any other information held on file.

This appointment replaces any existing arrangement in place between us/me and any other insurance intermediary formally appointed to advise on or arrange or negotiate our/my insurance requirements as described above.

Yours faithfully,

Signature	
Full name	
Position	
Email	
Entity name Per Contractor Licence	
Contractor Licence number	
ABN	

Note: The Letter of Appointment can only be executed by the director of the company.

Please return this form by email

If you have any questions or require assistance with this form, please call your HBCF distributor Insurance House.



Call us

1300 851 329



Email us

builders@insurancehouse.com.au