FIDELITY FUND

Owner Builder Application Form Checklist (Applicant)

The following things will help you complete the form and minimise our requests for further information.

Submitting the Application form

Check and ensure all sections on pages 1 and 2 are completed. ☐

Ensure all the owners have signed the Application. ☐

Must provide and attach

Owner Builder Registration Certificate provided by the Builder Practitioners Board NT ☐

Complete Building Plans with clear Breakdown of the floor area. (Living area, Garage, Veranda.) and Description of finish and fittings. ☐

FFNT Office Use

Certificate No. ……..

Paid ……..

Fax Certifier ……..

Fax Builder ……..

Fund Reference No ……..

FIDELITY FUND NT
APPLICATION BY OWNER BUILDER

When this form is complete, please deliver post, email or fax it to:

Office: Terminal One Building

11/396 Stuart Highway, Winnellie, NT 0820

Postal Address: PO Box 37121

Winnellie, NT, 0821

Email: fidelityfund@mbant.com.au

Fax: 08 89229600

Contact Us: 08 89229680

WORKS PROJECT INFORMATION

LOT No **STREET No**

STREET

SUBURB/TOWN

OWNERS DETAILS

OWNER (1)

FULL NAME

RESIDENTIAL/ POSTAL ADDRESS

CONTACT DETAILS (PH) **(MOBILE)**

EMAIL

OWNER (2)

FULL NAME

RESIDENTIAL/ POSTAL ADDRESS

CONTACT DETAILS (PH) **(MOBILE)**

EMAIL

HAVE YOU EVER BEEN BANKRUPT No
HAVE YOU EVER BEEN CONVICTED OF A DISHONESTY OFFENCE No
HAVE YOU EVER BEEN A DIRECTOR OF A BUSINESS THAT WAS INSOLVENT No
HAVE YOU EVER BEEN A REGISTERED BUILDER IN NORTHERN TERRITORY No

If yes, please provide details:

PROJECT DETAILS

DESCRIPTION OF PROJECT

VALUE OF PROJECT $

CONSTRUCTION PERIOD .WEEKS. **SIZE OF PROJECT** .M2

PROPOSED COMMENCEMENT DATE / /

MORTGAGEE (Insert name)

ENGINEER (Insert Name)

CERTIFIER.....(Insert Name)

DECLARATION

I/we declare that the information provided is true and correct. I/we acknowledge that the Fidelity Fund NT reserves the right to reject any application for cover and may require any additional information and undertakings before issuing cover.

I/we give express authority to the Fund to disclose any personal information for the assessment of this application, administration of the cover or any other matter necessary in respect of this project.

I/we agree to allow any representative of the Fidelity Fund NT to enter and inspect all works for which a certificate of cover has been issued.

I/we understand that by accepting this application form, that the Fund has not agreed to provide cover and the Fund reserves the right to seek further information prior to approval.

SIGNED BY ALL OWNERS

Signature …….. / /

(Please Print Full Name) .....

Signature …….. / /

(Please Print Full Name)

OFFICE USE ONLY

1. Application Received / /
2. Incomplete – letter sent / /
3. Received Complete on / /