APPLICATION TO THE BUILDING AND PROPERTY LIST (BUILDING)



Building and Property List Melbourne VIC 3001 Phone 1300 01 8228 email: civil@vcat.vic.gov.au

PRIVACY STATEMENT

A copy of VCAT's privacy statement is available on the VCAT website - www.vcat.vic.gov.au/privacy

GETTING STARTED

Use this form to apply to VCAT if your claim is about domestic, commercial or other building work, or to apply for a review of a decision of a warranty insurer.

If your claim is about domestic building work and one of the parties to your claim is an owner, you must first refer your dispute to Domestic Building Dispute Resolution Victoria (DBDRV) before you can make a claim to VCAT **unless you are applying for an injunction**.

To apply for a review of a DBDRV decision or review of certain decisions of the Victorian Building Authority (VBA), use the 'Application to the Building and Property List – Review of a Decision' form available on the VCAT website: www.vcat.vic.gov.au/case-types/building-and-construction

WHO CAN MAKE THIS APPLICATION?

Anyone can make an application arising from a building dispute, including owners, builders, sub-contractors, and architects. More information is available on the VCAT website: vcat.vic.gov.au/buildingclaims

FEES

An application fee may apply. To find out about fees go to www.vcat.vic.gov.au/fees



You will be guided through a set of questions that will assist in confirming that this is the correct form for your application. You may be directed to Domestic Building Dispute Resolution Victoria (dbdrv.vic.gov.au) before you can apply to VCAT.

ARE YOU SEEKING AN INJUNCTION OR URGENT HEARING?

Are you seeking an injunction? (An injunction is an order that directs someone to do or not to do something immediately).
No – Go to next question Yes – Go to Claim Details on Page 2.
Are you seeking an urgent hearing?
No – Go to next question Yes – Provide a reason below, then go to Claim Details on Page 2.



CLAIM DETAILS Is your claim for a monetary amount? Yes - Enter claim amount \$ No, non monetary Are you making this application in response to another VCAT application that has been served on you? No Yes - Provide VCAT reference number Is there, or has there been, a related proceeding at VCAT or in a court about the matters in dispute? Yes - Provide VCAT or court reference number Have you previously made a claim to VCAT about the matters in dispute? No Yes - Provide VCAT reference number What is your claim about? Commercial building work – Go to **Site Details** on Page 3. Domestic building work - Go to Domestic Building Work Claims below DOMESTIC BUILDING WORK CLAIMS If you reach the end of this 'Domestic Building Work Claims' section and do not tick any boxes then do not continue to complete this form. Please lodge an application to the DBDRV www.dbdrv.vic.gov.au Are you are an owner builder seeking an exemption under Section 68 of the Domestic Building Contracts Act 1995? Yes – Go to **Site Details** on Page 3 No – Go to next guestion Are you seeking a review of a decision of a warranty insurer? Yes – Provide details below, then Go to **Site Details** on Page 3 No - Go to next question Insurer's reference number Date decision received Is one of the parties to the dispute an owner? No – Go to Site Details on Page 3 Yes - Go to next question Does the work relate to a Single Trade? - Specify the type of work and go to Site Details on Page 3 Single trade refers to a dispute between an owner and a single trade engaged by the owner to carry out one only of the following work attaching external fixtures (including awnings, installing floor coverings security screens, insect screens and balustrades) electrical work plumbing work including drainage, fire protection glazing work, gas fitting, irrigation (non-agricultural) work, insulating mechanical services work (heating and cooling), refrigerated air conditioning work, roofing painting or plastering (stormwater) work, sanitary work, gas appliance wall and floor tiling conversion and servicing work or water supply work (but not work carried out by a gas company erecting a chain wire fence to enclose a tennis court or water authority or drainage works by a council) erecting a mast, pole antenna, aerial or similar structure.



Have you been to DBDRV or Building Advice Conc	(=====,	
Yes – You <u>must attach</u> one of the following before	ore lodging your application:	
a certificate of conciliation		
rejection letter from DBDRV		
a confirmation of complaint letter from BACV		
a dispute resolution order or		
a notice of breach of dispute resolution order (if a	a party has ended a contract as p	art of the DBDRV process)
SITE DETAILS		
If the claim is about more than one contract owned by the same person, separate applic		
Site address 1		
Street address		
Suburb/Town	State	Postcode
Site address 2 (if applicable)		
Street address		
Suburb/Town	State	Postcode
WHO IS MAKING THIS APPLICATION	ON?	
WHO IS MAKING THIS APPLICATION The applicant is the person who makes the applica		
	tion. As applicant are you:	rchitect Other
The applicant is the person who makes the applica	tion. As applicant are you:	rchitect Other
The applicant is the person who makes the application Owner Sub-contractor Owner-b	tion. As applicant are you:	rchitect Other
The applicant is the person who makes the application of the contractor of the contr	tion. As applicant are you: uilder Builder A Last name	
The applicant is the person who makes the application of the contractor of the contr	tion. As applicant are you: uilder Builder A Last name Jinal and/or Torres Strait Islande	
The applicant is the person who makes the application Owner Sub-contractor Owner-b If you are an individual: First name Do you wish to be identified as a person of Aborig	tion. As applicant are you: uilder Builder A Last name Jinal and/or Torres Strait Islande	
The applicant is the person who makes the application of the contractor of the contr	tion. As applicant are you: uilder Builder A Last name Jinal and/or Torres Strait Islande	
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The applicant is the person who makes the application of the contractor of the contr	tion. As applicant are you: uilder Builder A Last name ginal and/or Torres Strait Islande ame	
The applicant is the person who makes the applicated Owner Sub-contractor Owner-built you are an individual: First name Do you wish to be identified as a person of Aborigment of the sub-contractor Owner-built you are an individual trading under a business nature of the sub-contractor Owner-built you are an individual trading under a business nature of the sub-contractor Owner-built you are a person of Aborigment of the sub-contractor Owner-built you are a person of Aborigment of the sub-contractor Owner-built you are an individual: Do you wish to be identified as a person of Aborigment of the sub-contractor Owner-built you are an individual: Business Name ABN If you are a company Company name	tion. As applicant are you: uilder Builder A Last name ginal and/or Torres Strait Islande ame	



How can VCAT contact you?		
Name of contact person		
Daytime phone number		
Do you want VCAT notices and correspondence emailed	l to you?	
No Yes – provide email address below		
Email		
Are you and any other applicants repr professional advocate?	resented by a la	wyer or a
No Yes – complete information below		
Name of law firm or professional advocate		
Address		
Suburb	State	Postcode
Name of contact person		
Phone number		
Email		
Is there another applicant making this	s application wi	th you?
No – Go to section 'Who are you making this claim	against?' on Page 5	
Yes – Complete section 'Second applicant's details'	below	
SECOND APPLICANT'S DETAILS		
Tick the box that best describes the second applicant:		
Owner Sub-contractor Owner-builder	Builder	Architect Other
If the second applicant is an individual		
First name La	ast name	
Do you wish to be identified as a person of Aboriginal a	nd/or Torres Strait Islar	nder descent? No Yes
If the second applicant is an individual trading under a b	ousiness name:	
Business Name		
ABN		
If the second applicant is a company		
Company name	trading as	
ACN		



What	is the address of the second	applicant?	
Sam	e as first applicant		
Address			
Suburb		State	Postcode
How	can VCAT contact the second	applicant?	
Sam	e as first applicant		
Name o	contact person		
Phone n	umber		
No Email	Yes – provide email address below		
(i)	If there are more than two applicants, add fu additional applicants.	urther pages to the applicatior	with details of each of the
WHO	ARE YOU MAKING THIS CLA	IM AGAINST?	
The pers	on you are making the claim against is the	respondent	
Owr	er Sub-contractor Owner-builder	Builder Architect	Warranty Insurer Other
If the res	spondent is an individual		
First nan	ne	Last name	
If the res	spondent is an individual trading under a b	usiness name	
Business	Name		
ABN			
If the res	spondent is a company		
Compar	y name	trading as	
ACN			
①	If the respondent is a company, a current Coproceed. This extract verifies the name, statuthis information we cannot process your approved the saic.gov.au. If you need assistance, call ASIC Do not provide the free summary information address details and VCAT cannot accept it.	us and registered address for solication. The Australian Securities & In Con 1300 300 630.	vestments Commission website
I cor	firm I have a company extract which I will att	ach to this application	



What is the respondent's address and contact details? If the respondent is an individual – provide a street address (PO Box is not sufficient) If a company – provide address of Registered Office as on the ASIC Company Extract Name of contact person **Address** Suburb State Postcode Phone number (if known) Email (if known) Is the respondent represented by a lawyer or a professional advocate? Yes - Provide details below No Don't know Name of law firm or professional advocate **Address** Suburb State Postcode Name of contact person Phone number **Email** Are you claiming against another respondent? No – Go to 'What orders do you want VCAT to make' on Page 9 Yes - Complete section 'Second respondent's details' below SECOND RESPONDENT'S DETAILS Tick the box that best describes the second respondent: Owner Sub-contractor Owner-builder Builder Architect Warranty Insurer Other If the second respondent is an individual First name Last name If the second respondent is trading under a business name **Business Name** ABN If the second respondent is a company Company name trading as

ACN





If the respondent is a company, a current Company Extract must be attached to your application for it to proceed. This extract verifies the name, status and registered address for service for the respondent. Without this information we cannot process your application.

You <u>can buy</u> a current Company Extract from the Australian Securities & Investments Commission website asic.gov.au. If you need assistance, call ASIC on 1300 300 630.

	ance, call ASIC on 1300 300 630. nary information page from the ASIC website. not accept it.	It does not contain the registered
I confirm I have a company extract	which I will attach to this application	
What is the second respo	ndent's address and contact	details?
If the respondent is an individual – p	provide a street address (PO Box is not sufficie	ent)
If a company – provide address of Re	egistered Office as on the ASIC Company Ext	tract
Name of contact person		
Address		
Suburb	State	Postcode
Phone number (if known)		
Email (if known)		
Is the second respondent	represented by a lawyer or a p	orofessional advocate?
Yes – Complete only if different fr		n't know
Name of law firm or professional advoc	cate	
Address		
Suburb	State	Postcode
Name of contact person		
Phone number		
Email		
Are you claiming against	another respondent?	
No – Go to 'What orders do you	want VCAT to make' on Page 9	
Yes – Complete section 'Third res	spondent's details' below	
THIRD RESPONDENT'S D	ETAILS	
Tick the box that best describes the thir	. — — —	
	Owner-builder Builder Architect	Warranty Insurer Other
If the third respondent is an individua		
First name	Last name	



If the third respondent is trading under a business name Business name **ABN** If the third respondent is a company Company name trading as ACN If the respondent is a company, a current Company Extract must be attached to your application for it to proceed. This extract verifies the name, status and registered address for service for the respondent. Without this information we cannot process your application. You can buy a current Company Extract from the Australian Securities & Investments Commission website asic.gov.au. If you need assistance, call ASIC on 1300 300 630. Do not provide the free summary information page from the ASIC website. It does not contain the registered address details and VCAT cannot accept it. I confirm I have a company extract which I will attach to this application What is the third respondent's address and contact details? If the respondent is an individual - provide a street address (PO Box is not sufficient) If a company – provide address of Registered Office as on the ASIC Company Extract Name of contact person Address Suburb State Postcode Phone number (if known) Email (if known) Is the third respondent represented by a lawyer or a professional advocate? Yes - Complete only if different from first respondent Don't know Name of law firm or professional advocate Address Suburb State Postcode Name of contact person Phone number **Email**

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If there are more than three respondents, add further pages to the application with details of each of the additional respondent.



WH.	AT ORDERS DO YOU WANT VCAT TO MAKE?	
	Payment of money (including damages)	
	Order to comply with a contract (eg: rectification or completion of building work)	
	Vary or cancel a contract	
	Vary or reverse a decision made by a warranty insurer	
	Other	
	our reasons below. If you need more space, you can attach a document setting out your reasons. atively, attach a points of claim.	
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	Points of claim attached	
HEA	ARING ARRANGEMENTS	
Do you	u or any other person appearing at the hearing need special assistance?	l
	No – Go to 'Required and supporting documents' on Page 10	
	Yes – specify what special assistance is needed	
	hearing loop	
	interpreter – who needs an interpreter?	
	First name Last name	
	Language/dialect	
	other (e.g. assisted access) - please specify	



If security is required at the hearing, please fill in the security application form. www.vcat.vic.gov.au/resources/security-request-form



REQUIRED AND SUPPORTING DOCUMENTS

i con	inm I have attached the following required documents to the application			
	An ASIC Company Extract (if a respondent is a company)			
	Certificate of conciliation or letter of rejection from DBDRV			
	OR			
	Confirmation of complaint from BACV			
	Notice of breach of dispute resolution order or copy of dispute resolution order (where contract ended by owner or builder as part of the DBDRV process)			
Supp	porting documentation			
	Schedule of additional applicants or respondents (if applicable)			
	Expert reports (including colour photos)			
	Points of Claim			
	Other supporting documents			
If yo	u are posting your application to VCAT			
	An <u>extra copy</u> of your application and supporting documents for each respondent is included			
AC	KNOWLEDGMENT			
Nam	Name of the person completing this application			
First	name Last name			
lund	erstand and acknowledge that:			
t	o the best of my knowledge, all information provided in this application is true and correct.			
1 1	t is an offence under section 136 of the Victorian Civil and Administrative Tribunal Act 1998 to knowingly give false or misleading information to VCAT.			
	Date dd / mm / 20yy			



HOW CAN YOU LODGE THIS APPLICATION?

By email

civil@vcat.vic.gov.au

By Post

Victorian Civil and Administrative Tribunal Building and Property List GPO Box 5408 Melbourne VIC 3001

Note: If you are posting, you must include an **extra copy** of your application and supporting documents for each respondent in the case.

ABOUT VCAT FEES

VCAT fees are charged according to three levels:

- **corporate fees** for businesses and companies with a turnover of more than \$200,000 in the previous financial year, corporate entities and government agencies
- standard fees for individuals, not-for-profit organisations, and small businesses and companies with a turnover of less than \$200,000 in the previous financial year. Companies must provide a statutory declaration to support this claim
- **Health Care Card fees** for people who hold the Australian Government Health Care Card. You must provide a copy of your card with your application

To find out if you need to pay an application fee and how much it costs, visit the fees page at www.vcat.vic.gov.au/fees

FEE RELIEF

We can reduce or not charge (waive) a VCAT fee in certain circumstances.
Some people are automatically entitled to a full fee waiver. You can also apply for fee relief if paying the fee would cause you financial hardship.
Visit www.vcat.vic.gov.au for more information about fee relief.
Are you applying for fee relief?
No – complete Fee payment section
Yes – complete Fee relief form and attach it to this application form
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Yes – complete Fee relief form and attach it to this application form	
EE PAYMENT	
Complete this section unless you are applying for fee relief or no fee is payable. Choose the fee level:	
Standard Corporate Health Care Card	
ee amount charged:	
CARD DETAILS	
Cards accepted: VISA MasterCard	
Cardholder name:	
Card number:	
Card expiry: mm /	