



## **BUILDER APPLICATION FORM**

| Name of Business   |   |                              |   |  |  |  |  |
|--|---|------------------------------|---|--|--|--|--|
| Street Address   |   |                              |   |  |  |  |  |
| City/Town  |   | Province                     | Postal Code   |  |  |  |  |
| Email  | Website   |                              |   |  |  |  |  |
| Office Phone   | Fax # Cell #  |                              |   |  |  |  |  |
| TYPE OF BUSINESS   |   |                              |   |  |  |  |  |
| Check all that apply:  |   |                              |   |  |  |  |  |
| <ul> <li>Incorporated Company</li> <li>Sole Proprietorship</li> <li>Foundation Contractor</li> </ul> | Developer     Developer     Partnership     Limited Partnership | General Contractor           | roject / Construction Manager   |  |  |  |  |
| Name of Principal  |   |                              |   |  |  |  |  |
| Address  |   |                              |   |  |  |  |  |
| Title Dr   | ivers License #   | Date of Birth                | ۱   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
| COMPANY DIRECTORS,<br>Name   | Title   | Address                      | Phone No.   |  |  |  |  |
|  |   | Address                      |   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
| Have you or any shareholder  | or principal ever been b  | ankrupt or in receivership   | Yes   No<br>proceedings   |  |  |  |  |
| Have you or any shareholder  | or principal ever been re                                       | egistered with a new hom     | e warranty program  |  |  |  |  |
|  | omply with the provisions of                                    | the Lux Residential Warranty | knowledge, having made the necessary<br>Program Inc. enrolment for Builders and |  |  |  |  |
| Builder Signature  |   | Date                         |   |  |  |  |  |
| Email or Fax to:   |   |                              |   |  |  |  |  |
|  |   |                              |   |  |  |  |  |
| info@luxwarranty.com   |   |                              |   |  |  |  |  |

Phone (506) 854- 4432 Toll-Free (877) 854 - 4432 Fax (506) 854 - 6330





## **BUILDER'S REFERENCE SHEET**

Please identify three of your suppliers / sub-trades

| NAME: | PH: |
|-------|-----|
| NAME: | PH: |
| NAME: | PH: |

Please identify three: customers, new homes or significant renovations

| NAME: | PH: |
|-------|-----|
| NAME: | PH: |
| NAME: | PH: |

## RESUME

Please provide a brief resume indicating your *construction experience, any related education* (Licensed carpenter, Engineer ...) as well as, your future objectives in building.





## NET WORTH SHEET

Name of Builder: \_\_\_\_\_

|  | ASSETS |        | LIA                            | BILITIES     |          |
|--|--------|--------|--------------------------------|--------------|----------|
| CASH   | \$     | TA     | XES                            | \$           |          |
|  | \$     | LI     | NES OF CREDIT                  | \$           |          |
| REAL ESTATE  | \$     | M      | ORTGAGE                        | \$           |          |
| AUTO   | \$     | AU     | JTO                            | \$           |          |
| OTHER  | \$     | 0      | THER                           | \$           |          |
| OTHER  | \$     | 0      | THER                           | \$           |          |
| OTHER  | \$     | CF     | REDIT CARD                     |              |          |
| TOTAL ASSETS \$  |        | тс     | DTAL LIABILITIES               | S \$         |          |
|  |        |        | ET WORTH<br>SETS - LIABILITIES | \$           |          |
|  |        |        |                                |              | Yes   No |
| Are you a Guarantor on any other debts? Provide Details            |        |        |                                |              |          |
| Are there any laws suits or judgement against you? Provide Details |        |        |                                |              |          |
| Have you declared bankruptcy? Provide Details                      |        |        |                                |              |          |
| DATED THIS   | DAY OF | 20     |                                |              |          |
|  |        | Daga 7 | S                              | Signature of | Builder  |