



TimberSecure Insurance Application

TimberSecure Insurance App	lication	Rapid Solutions 1/5 Pavilion Place Cardiff, NSW 2285
Date:		Phone: 1300 302 549
Your Details		Fax: 02 4954 3660 www.timbersecure.com.au
Name:		AFSL: 232 422
Home Phone:		
Mobile Phone:		
Email:		
Date of Birth:	(DD/MM/YYYY)	
Address of Property	Correspondence Addre	ess (If different)
Address:	Address:	
State:	State:	
Postcode:	Post Code:	
Pest Control Details		
Name of Pest		
Control Business:		
Date of installation:	Certificate of Treatment	t
Is your house built on an infill slab? OYes	○ No ○ Unsure	
If you are unsure whether your house is built on an infill s	lab, please contact your pest controller or a b	uilder.
Payment Details		
Credit Card		
○ Visa ○ MasterCard		
Card Number:		
Name on Card:	Expiry Date:	(MM/YY)
Electronic Funds Transfer (EFT)		
BSB:082637Account:538229747Name:Rapid Solutions Trust Account 2Reference:Your (Policy Holder) NameAmount:\$360 (inc GST & stamp duty)		
Signature:	Date:	