

Body Corporate and Community Management Act 1997  
Section 206  
INFORMATION FOR DISCLOSURE STATEMENT

as at 20 January 2024

Body Corporate	Name of Scheme:	<b>KURRAJONG APARTMENTS</b>		
	Community Titles Scheme No:	<b>17773</b>		
	Lot Number:	<b>1</b>	Plan Number:	<b>101203</b>

Secretary	Name	<b>Desley Brimblecombe</b>		
	Address	<b>C/O Ace Body Corporate P O Box 2389 Graceville East, Qld 4075</b>		

Telephone

Body Corporate Manager	Name	<b>Ace Body Corporate (Brisbane Sth West)</b>		
	Address			

Telephone

**Contributions  
and Levies**

Levies Determined by the Body Corporate for this Lot

Administrative Fund	Amount	Due Date	Discount	If Paid By
01/12/22 to 28/02/23	\$189.64	01/12/22	\$14.22	01/12/22
01/03/23 to 31/05/23	\$189.64	01/03/23	\$14.22	01/03/23
01/06/23 to 31/08/23	\$405.80	01/06/23	\$30.44	01/06/23
01/09/23 to 30/11/23	\$405.80	01/09/23	\$30.44	01/09/23
01/12/23****29/02/24	\$405.80	01/12/23	\$30.44	01/12/23
01/03/24****31/05/24	\$405.80	01/03/24	\$30.44	01/03/24
Sinking Fund	Amount	Due Date	Discount	If Paid By
01/12/22 to 28/02/23	\$144.72	01/12/22	\$10.85	01/12/22
01/03/23 to 31/05/23	\$144.72	01/03/23	\$10.85	01/03/23
01/06/23 to 31/08/23	\$78.00	01/06/23	\$5.85	01/06/23
01/09/23 to 30/11/23	\$78.00	01/09/23	\$5.85	01/09/23
01/12/23****29/02/24	\$78.00	01/12/23	\$5.85	01/12/23
01/03/24****31/05/24	\$78.00	01/03/24	\$5.85	01/03/24

**Special Levies**

Improvements on Common Property for which Buyer will be Responsible	Lot No	Date of Resolution	Authority Given To	Description of Area	Conditions

Body Corporate  
Assets Required to  
be Recorded on  
Register

Body Corporate and Community Management Act 1997  
Section 206  
INFORMATION FOR DISCLOSURE STATEMENT (continued)

Committee

Information prescribed under Regulation Module

Signing

\_\_\_\_\_  
Seller/Sellers Agent

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Buyers Acknowledgement

The Buyer acknowledges having received and read this statement from the Seller before entering into the contract.

\_\_\_\_\_  
Buyer

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Lot Entitlements and Other Matters

Interest Schedule	Aggregate	44	Entitlement of Lot	4
Contribution Schedule	Aggregate	44	Entitlement of Lot	4
Balance of Sinking fund at end of last Financial Year		20,999.47	as at	30/11/23
Insurance Levies not included in Administrative Fund Levies:		See Other Levies		
Monetary Liability under Exclusive Use By-Law				

## Additional Information

Other Levies	Amount	Due Date	Discount	If Paid By
Insurances				
01/12/22 to 28/02/23	\$65.67	01/12/22	\$4.93	01/12/22
01/03/23 to 31/05/23	\$65.67	01/03/23	\$4.93	01/03/23
01/06/23 to 31/08/23	\$108.00	01/06/23	\$8.10	01/06/23
01/09/23 to 30/11/23	\$108.00	01/09/23	\$8.10	01/09/23
01/12/23 to 29/02/24	\$108.00	01/12/23	\$8.10	01/12/23
01/03/24 to 31/05/24	\$108.00	01/03/24	\$8.10	01/03/24

Insurance	Type/Name of Insurer	Policy Number	Sum Insured	Renewal Date
	<i>APPEAL EXPENSES</i> CHU Underwriting Agencies P/L	HU0015512	100,000.00	20/10/24
	<i>BUILDING</i> CHU Underwriting Agencies P/L	HU0015512	2,150,000.00	20/10/24
	<i>CATASTROPHE</i> CHU Underwriting Agencies P/L	HU0015512	645,000.00	20/10/24
	<i>CATASTROPHE-OTHER</i> CHU Underwriting Agencies P/L	HU0015512	32,250.00	20/10/24
	<i>CATASTROPHE-RENT/ACC</i> CHU Underwriting Agencies P/L	HU0015512	32,250.00	20/10/24
	<i>CATASTROPHE-TEMP ACC</i> CHU Underwriting Agencies P/L	HU0015512	96,750.00	20/10/24
	<i>COMMON AREA CONTENTS</i> CHU Underwriting Agencies P/L	HU0015512	10,000.00	20/10/24
	<i>FIDELITY GUARANTEE</i> CHU Underwriting Agencies P/L	HU0015512	250,000.00	20/10/24
	<i>GOVT AUDIT COSTS</i> CHU Underwriting Agencies P/L	HU0015512	25,000.00	20/10/24
	<i>LEGAL EXPENSES</i> CHU Underwriting Agencies P/L	HU0015512	100,000.00	20/10/24
	<i>LOSS OF RENT</i> CHU Underwriting Agencies P/L	HU0015512	322,500.00	20/10/24
	<i>LOT OWNERS IMPROVE</i> CHU Underwriting Agencies P/L	HU0015512	250,000.00	20/10/24
	<i>MACHINERY BREAKDOWN</i> CHU Underwriting Agencies P/L	HU0015512	10,000.00	20/10/24
	<i>OFFICE BEARERS</i> CHU Underwriting Agencies P/L	HU0015512	5,000,000.00	20/10/24
	<i>PUBLIC LIABILITY</i> CHU Underwriting Agencies P/L	HU0015512	30,000,000.00	20/10/24
	<i>VOLUNTARY WORKERS</i> CHU Underwriting Agencies P/L	HU0015512	\$200,000/\$2,000	20/10/24

Mortgages or  
Securities over  
Body Corporate  
Assets

## Additional Information

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Latent or Patent  
Defects in  
Common  
Property or Body  
Corporate Assets

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Actual or  
Contingent or  
Expected  
Liabilities of Body  
Corporate

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Circumstances in  
Relation to  
Affairs of the  
Body Corporate

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Exceptions to  
Statements in  
Clause 7.4(3)

## INSURANCE REPORT

20 January 2024

**KURRAJONG APARTMENTS CTS 17773**71 Waldheim Street  
ANNERLEY 4103

Type <b>BUILDING</b>		Sum Insured <b>\$2,150,000</b>	Premium <b>\$5,726.24</b>	Date Last Paid <b>28/09/23</b>
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments <b>\$1000 Std excess \$1000 Legal, Mach, Flood Flood cover - INSURED</b>		

Type <b>LOSS OF RENT</b>		Sum Insured <b>\$322,500</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>CATASTROPHE</b>		Sum Insured <b>\$645,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>PUBLIC LIABILITY</b>		Sum Insured <b>\$30,000,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>FIDELITY GUARANTEE</b>		Sum Insured <b>\$250,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>OFFICE BEARERS</b>		Sum Insured <b>\$5,000,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

# INSURANCE REPORT

## KURRAJONG APARTMENTS CTS 17773

71 Waldheim Street  
ANNERLEY 4103

Type <b>VOLUNTARY WORKERS</b>		Sum Insured <b>\$200,000/\$2,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>GOVT AUDIT COSTS</b>		Sum Insured <b>\$25,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>LEGAL EXPENSES</b>		Sum Insured <b>\$100,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>MACHINERY BREAKDOWN</b>		Sum Insured <b>\$10,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>LOT OWNERS IMPROVE</b>		Sum Insured <b>\$250,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>APPEAL EXPENSES</b>		Sum Insured <b>\$100,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

# INSURANCE REPORT

## KURRAJONG APARTMENTS CTS 17773

71 Waldheim Street  
ANNERLEY 4103

Type <b>CATASTROPHE-TEMP ACC</b>		Sum Insured <b>\$96,750</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>COMMON AREA CONTENTS</b>		Sum Insured <b>\$10,000</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>CATASTROPHE-RENT/ACC</b>		Sum Insured <b>\$32,250</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type <b>CATASTROPHE-OTHER</b>		Sum Insured <b>\$32,250</b>	Premium	Date Last Paid
Company/Broker <b>CHU Underwriting Agencies P/L Resolute</b>	Telephone	Policy Number <b>HU0015512</b>	Due Date <b>20 October 2024</b>	
	Facsimile	Excess/Comments		

Type		Sum Insured	Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	Due Date	
	Facsimile	Excess/Comments		

Type		Sum Insured	Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	Due Date	
	Facsimile	Excess/Comments		