

Important privacy information

By completing this form you give us personal information. By signing it you acknowledge that you have received and had the opportunity to read our Privacy Statement which contains important information about our management of personal information.

For more information, see our Privacy Policy which is available on request or on our website.

Property details

Request to discharge the registered Mortgage over the following property(s):

This property will be

Flat/Box/Type Flat/Box/Type no.

Street number Street name

Street Type Suburb

State Post Code

Mortgage number Certificate of Title reference

Details for property(s) being refinanced:

Financial Institution/Settlement Agent

Contact name

Phone Fax

Anticipated settlement date

Funds disbursement

Account number

Payout and close Retain and reduce limit to

Balance of funds to account number

Other instructions

Discharge Authority

Please note: The Lands Titles Office are converting all Certificates of Title to a computerised format. If your Certificate of Title has not already been converted to the computerised format and you would like it returned, a fee may be payable to the Lands Titles Office. In some states, Certificates of Title may no longer be issued.

- I/We would like to collect the Certificate of Title from the branch noted below. I/We would like my/our Certificate of Title to be returned to the following address.

Branch for collection of CT (if applicable)

Return the CT to this address (if applicable)

Flat/Box/Type	<input type="text"/>	Flat/Box/Type no.	<input type="text"/>
Street number	<input type="text"/>	Street name	<input type="text"/>
Street Type	<input type="text"/>	Suburb	<input type="text"/>
State	<input type="text"/>	Post Code	<input type="text"/>

I/We have been informed of the fees that apply to discharge the registered Mortgage - Preparation of Discharge, Registration of Discharge and Lands Titles Office (fee only applicable if Certificate of Title is to be returned), and authorise those fees to be paid by:

- My/Our savings account Savings account number
- Cheque, which I/We will attach to this authority to cover the appropriate fees
- Fees will be provided at settlement

Borrower(s) Declaration

I/We authorise the Credit Union to surrender the above detailed security/securities to the representatives detailed above, in exchange for the settlement requested by the Credit Union.

I/We also authorise the Credit Union to provide the Legal Representative or Financial Institution above (or their legally appointed representatives, if applicable) with any information or documentation they require about this account and security/securities in order to effect settlement.

I/We agree to pay all fees and debts associated with the release of the security/securities mentioned above. I/We understand that, if funds allow, fees will be sourced directly from either the loan account (and will appear on my/our statement) or from the proceeds of the settlement.

Name	<input type="text"/>	Member no.	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

Operator ID