ANZ DISCHARGE AND VARIATION AUTHORITY



| | I . |
|-------------------|-----|
| | |
| Λ NIZ Dof | I . |
| AIV/ KEI | |
| ANZ KET | |

To assist us in processing your request in a timely manner, please complete appropriate sections in full (as missing details may result in delays).

- This request must be signed by all parties to your loan (including Guarantors), not only property owner(s).
- Any fields that are not applicable should be marked N/A.
- For business loans please contact your Relationship/Business Manager to arrange for release of property.
- For all enquiries please call 1800 603 361 8:00am to 6:00pm AEST & 5:00pm AWST
- ANZ requires minimum 7 business days to process a release request
- ANZ requires an additional 5 business days for processing where a reassessment is required
- Where a release file is booked for settlement and changes are made to the Discharge and Variation Authority form which require reassessment, settlement must be cancelled and an additional 5 business days processing time will be required

Please use BLOCK CAPITALS to complete this form.

| TO DETERMINE THE TYPE OF REQUEST AND SECTIONS TO BE COMPLETED, PLEASE REFER BELOW: | | | |
|---|--|--|--|
| I am selling/have sold my property and would like my loan/s to be closed | Complete all sections, except G & H | | |
| I am selling/have sold my property and would like my loan/s to remain open* | Complete all sections except G & H Only complete section G & H if you are requesting to receive your title | | |
| l am selling/have sold my property and would like to replace it with a new security/property* | Complete all sections except G & H | | |
| I have paid off/reduced my loan and would like to receive my title | Complete sections A,B,C,D,G,H,I | | |
| I am refinancing to another financial institution | Complete all sections Except G & H | | |
| I would like to restructure my existing loans/securities | Complete all sections except G | | |
| Other – I would like release a term deposit/PPSR/Water mortgage | Please include any information not captured on this form in writing. | | |

^{*}Subject to approval

To process any of the above for a Deceased Estate, ANZ will require a copy of the Death Certificate or probate along with this completed Discharge Authority or documentation supporting your status as legal representative.



Email your request to: releasesdava@anz.com



Fax pages 2, 3 4 and 5 to the Releases & Security Variations Team: 1300 764 916

Or alternatively, you can mail your request to:



Releases & Security Variations, Locked Bag 38002 Docklands Vic 8012

Please allow up to 1 business day for your request to be received and file created. Notification will be sent confirming receipt.

FEES AND CHARGES

ANZ fees relating to the settlement, lodgement and preparation of a discharge are contained in your Letter of Offer and the ANZ Personal Banking - General Fees and Charges booklet available at any ANZ Branch or visit www.anz.com

ANZ Settlement Fee \$160 ANZ Discharge/Production Fee \$160

Government registration fees may also apply.

| | | | А | NZ Ref | |
|--|---|--------------------------------|---|----------------------|---------------|
| SECTION A - CUSTOMER DET | ΓAILS | | | | |
| Full name of all registered security | holders and horrowers includin | a previous names | | | |
| First Name | Last Name | g previous numes. | Tick primary | contact & provide | e details |
| 1 | | | ☐ Home | | |
| 2 | | | Work | | |
| 3 | | | ☐ Fax | | |
| | | | | | |
| 4 | | | | | |
| 5 | | | L Email | | |
| SECTION B - REPRESENTATI\ | /E DETAILS (REQUIRED F | OR CORRESPON | IDENCE PURPOSE | S) | |
| Phone and fax numbers are mandator of title, items will be sent via registered | | | | | |
| Borrower Representative So | licitor Conveyancer | Other Financial | Institution A | NZ Branch | Myself Other |
| Contact Name | | Company | /Branch Name | | |
| | | | | | |
| Mailing Address | | Suburb | | State | Postcode |
| | | | | | |
| Phone Number | Mobile Number | | Fax Num | iber* | |
| Email | | | | | |
| Erridii | | | | | |
| *For Settlement matters fax numbe | r is mandatory | | | | |
| Broker details (If applicable) | | | | | |
| Contact Name | | Email | | Phone | |
| | | | | | |
| Preferred ANZ Branch address for sign | ing of documents if required / ANZ | Z Staff Contact: | | | |
| | | | | | |
| SECTION C - DISCHARGE TYP | PE | | | | |
| Date of Cottlement | (Important to provide | if known) | | | |
| Date of Settlement | | | 2+0 | | |
| Reason for discharge of security: Se I have sold my property and will be | , , | e sections are compi | ete. | | |
| Is Section 27 required? (Victoria onl | | | | | |
| I have sold my property and would | like my loan/s to remain open with | h existing security alre | adv held by AN7 | | |
| Is Section 27 required? (Victoria onl | | ·· | | | |
| I would like to provide a substitute | security *subject to ANZ approval | | | | |
| Please tick item to be substituted. | 99 | | | | |
| ☐ I have/will be purchasing a ne | ew property (enter property details | in section D as ADD) | | | |
| (Please submit copy of Purchase Con concessions approved by SRO will be | | equest). Please note: Fu | ll stamp duty will be char | ged at settlement, a | ny applicable |
| | nter property details in section D as | | | | |
| specifying changes and details | n Deposit as temporary security* (ar s of lending will be prepared by AN. | Z and sent to your pr o | | | |
| I would like to receive my title (Nil [| | | . , , , , , , , , , , , , , , , , , , , | | |
| _ | il Debt) *please ensure all loans asso main open (with additional equity h | | • | | |
| l am refinancing to another institut | | | | | |
| l am restructuring my existing loan | | | | | |
| I would like to remove a Guarantee | , , | | | | |
| I would like to release Term Deposi | wersk/water iviortdade | | | | |

| | | | ANZ Ref | |
|--|---|-------------------------------|--------------------------------------|-------------------------------------|
| ECTION D - CHANGE OF SECURITY DETAILS | | | | |
| L properties linked to loan(s) must be detailed to prevent | delavs | Certificate of | 6: 1 1/ | Sale Price |
| Address of properties/securities to be discharged/retained/add | • | Title Reference (if known) | Discharged/ Retain/Add | (Mandatory if property sold) |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | |
| | | | | \$ |
| n Account Number(s) | To be paid out in full and limit cancelled? | To be reduced to | To be repaid from new ANZ loan | Application Number (if known) |
| n Account Number(s) | | To be reduced to | | |
| | Yes No If no, | \$ | □ Vaa □ Na | |
| | | | | |
| | Yes No If no, | \$ | Yes No | |
| | 7 | \$ | | |
| | Yes No If no, | | Yes No | |
| | Yes No If no, Yes No If no, | \$ | Yes No | |
| | Yes No If no, Yes No If no, Yes No If no, Yes No If no, | \$ | Yes No Yes No Yes No | |

*If no account number is provided and no ANZ accounts held, we will issue a cheque and post to representative nominated in section B

| SECTION G - REQUEST FOR CERTIFICATE OF TITLE |
|--|
| Please choose one option only & refer to page 1 for applicable fees. /We would like ANZ to: Register my discharge and send clear title to representative in section B. Please allow up to 4 weeks for registration to be completed Or |
| Send me the unregistered Discharge of Mortgage/Title |
| Land Title Offices in NSW, WA, SA, & VIC will only permit a registered proprietor to register a discharge of mortgage if they are selling/refinancing or transferring ownership of property in the same transaction |
| SECTION H - PAYMENT OPTIONS (REQUEST FOR TITLE AND INTERNAL ANZ REFINANCES ONLY*) |
| *For all other settlement types, fees will be collected at settlement. |
| /We would like ANZ to: |
| Please debit my/our account listed below (ANZ Accounts only) for the fees. Account holders must be listed in section A . BSB |
| Please debit my/our credit card listed below for the fees |
| Card Number Card Expiry Date |
| Cardholder's Name Contact Phone Number |
| |
| Cardholder's Signature |
| Date (DD/MM/YYYY) |
| |

| ANZ Ref | |
|---------|--|

SECTION I - CUSTOMER AUTHORITY TO BE SIGNED BY ALL PARTIES TO THE LOAN(S) INCLUDING GUARANTORS

I/We Authorize ANZ to provide my/our solicitors or appointed representatives or other financial institutions detailed in Section B with:

- the amount(s) required to payout the loan(s) and to provide a discharge for the properties held by ANZ.
- Information required about my/our loan accounts and security held.

I/We agree:

- that ANZ will cancel all facilities linked to the loan account(s) [offset facilities, limits] including placing a hold over such loan account(s) if applicable.
- to pay all monies due to the Bank and fees applicable in accordance with the terms and conditions of the loan. We remain liable for any outstanding amount if any error is made in calculation of the amount repayable at settlement.
- that if more than one property secures my/our loan(s), the total loan amount may be reduced to a level acceptable by the Bank and acknowledge that if there are Guarantors over my/our loans that I/We will notify them and ask them to make separate requests to ANZ for the release of their obligations and security(s) held and ask them to agree to the discharge and/or variation I/We are now seeking. Guarantors will need to separately approach ANZ for the variation or release of their obligations and security(s) held.
- not to make any drawings (including loan redraws) against the account(s) being paid out 3 days prior to settlement. If facilities are continuing credit facilities, e.g. Equity Manager Account or Account(s) with limits, I/We will not draw on all remaining credit funds in the account(s) after settlement as these funds will be present to cover interest accruals to be charged at account interest charge cycle date. These accounts will not be closed unless a formal request is made via a branch.
- if it is deemed necessary to accept surplus funds to effect settlement, ANZ will not be responsible for depositing these funds to an appropriate account in my/our names being sole or in joint names if an account number has not been provided in Section F.

Signed by:

| Customer/Guarantor/PO | M* I Full Name smust be supplied for POA) | Customer/Guarantor/POA 2 Full Name |
|------------------------|--|---|
| (supporting documents | must be supplied for FOA) | Customer/Guarantor/FOA 2 Full Name |
| | | |
| Signature | | Signature |
| | | |
| | | |
| Date (DD/MM/YYYY) | | Date (DD/MM/YYYY) |
| | | |
| | | |
| Customer/Guarantor/PO | A 3 Full Name | Customer/Guarantor/POA 4 Full Name |
| | | |
| Signature | | Signature |
| | | |
| | | |
| Date (DD/MM/YYYY) | | Date (DD/MM/YYYY) |
| | | |
| | | |
| | ch branch, please complete sections as outlin above have been identified in accordance to | |
| Full name of staff mer | nber | Branch Stamp |
| | | |
| Signature | | |
| | | |
| | | |
| If valuation has been | ordered on related securities, enter details be | elow |
| Valuation order numb | | Date ordered |
| | e Servicing requires further information or cla | |
| Please tick (□) | 3 1 | |
| | g to contact customer 1 /2 /3 /4 (please circle) | e) directly on phone number recorded in contact details in Section A. |
| | | number is vital in order to receipt your request. |
| ANZ Staff Email Addre | | Branch/Business Centre |
| | | |
| DCD. | Controlling Deat | Contact Dhana Number |
| BSB | Controlling Post | Contact Phone Number Fax No |
| | | |