

Security Documents Release Request

To discharge securities taken as part of secured lending facilities

Branch Name:		Date:	
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Borrower Details:			
Borrower Name(s) in full			
Name of Borrower to be contacted		Daytime Contact No.	

Release Type:	Contact Name & Details:
<input type="checkbox"/> Refinance	
<input type="checkbox"/> Sale/Release	
<input type="checkbox"/> Partial/Substitution of Security <input type="checkbox"/> Submission attached	

Place of Settlement:	Date of Settlement:

Authority Held to discharge the following Real Property Securities:			Branch Use
Address	R/M No	Title Ref	Partial/Full/Sub
1.			
2.			
3.			
4.			

Authority Held to discharge the following Other Securities:		Amount	Branch Use
Guarantee By			Partial/Full/Sub
1.			
2.			
Bill of Sale/Goods Mortgage			
Fixed and Floating Charge			
Letter of Set-Off - (TIA A/c No.)			
Other Security			
Loan Underwriting Policy No/s			

Action Required for Loan Accounts Related to this Release:				Overdraft Accounts Only	
Account Name	Account Number	Amount from Settlement	Reduce Limit to \$	Cancel Limit Only – A/c to remain open new A/c code	Payout and Close
				or	or <input type="checkbox"/>
				or	or <input type="checkbox"/>
				or	or <input type="checkbox"/>
				or	or <input type="checkbox"/>

Accounts For Credit of Surplus Funds Minus Any Fees and Charges Due:		
Account Name	Account Number	Amount

Address After Settlement:			
Residential Address			
		Postcode	
Postal Address			
		Postcode	

I acknowledge that the Bank will action my request to release the noted securities and dispose of any surplus funds in accordance with my instruction above

1. Borrower/Guarantor/Mortgagor Name	Borrower/Guarantor/Mortgagor Signature
2. Borrower/Guarantor/Mortgagor Name	Borrower/Guarantor/Mortgagor Signature
3. Borrower/Guarantor/Mortgagor Name	Borrower/Guarantor/Mortgagor Signature
4. Borrower/Guarantor/Mortgagor Name	Borrower/Guarantor/Mortgagor Signature

Bank Use Only:	
All information provided above has been validated as correct and required supporting documentation is attached. This release is approved to proceed.	
Account Manager Name	Account Manager Signature

Release of Security Notification

Number of pages transmitted _____ (including this page)

Date _____ Time _____

Recipient

Sender

To _____ Branch _____

Attention _____ Cost Centre _____

Fax No _____ Fax No. _____

Borrower Details

Name/s _____ Account No _____

Message

Documents Attached and Validations Performed

Select from list below applicable items being forwarded and validations performed:

- | | |
|---|--|
| <input type="checkbox"/> Copy of Recent Title Search and/or Company Search Attached | <input type="checkbox"/> Sales Contract Attached |
| <input type="checkbox"/> Recent submission attached (signed and approved copy) | <input type="checkbox"/> Signed <i>Security Documents Release -Request</i> |

To be completed by the Account Manager

Tick off from the list below that the validation has been completed:

- | | | |
|---|--|---|
| <input type="checkbox"/> Security Documents Release Request Form notes: | <input type="checkbox"/> Security Address relating to the release | <input type="checkbox"/> Correct Branch Name |
| | <input type="checkbox"/> Mortgage Number | <input type="checkbox"/> Title Reference Number |
| | <input type="checkbox"/> Substitution of Security (if applicable) | <input type="checkbox"/> Partial Release (if applicable) |
| | <input type="checkbox"/> Settlement Location | <input type="checkbox"/> Cost Centre (top of form) |
| | <input type="checkbox"/> Funds Distribution & Allocation | <input type="checkbox"/> Signed by a <i>Home Branch</i> Account Manager |
| | <input type="checkbox"/> Future address from customer (ie. if sale of owner occupied property) | |
| | <input type="checkbox"/> All accounts related to this security are noted | |

Account Manager Certification

I confirm the above validations have been completed prior to the submission of this request to the Loan Centre

Account Manager _____

This facsimile is confidential to the addressee. It may also be privileged. Neither the confidentiality nor any privilege attaching to this facsimile is waived lost or destroyed by reason that it has been mistakenly transmitted to a person or entity other than the addressee. If you are not the addressee please notify us immediately by telephone or facsimile at the numbers provided and return the facsimile to us by post at our expense.

If you do not receive all of the pages, or if you have difficulty with the transmission, please call (07) 3212 3333 and ask for the sender.