

## Discharge Authority

### PERSONAL DETAILS

Loan Account Number	
First Name	
Surname	
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms

### DISCHARGE AUTHORITY

**Reason:**    Sale    Refinance    Other

**Type:**    Full Discharge    Partial Discharge

I/ We hereby authorise Loan Avenue Pty Ltd and or its solicitors or agents to provide to:

**Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Solicitor Phone No:** \_\_\_\_\_

**New Financier:** \_\_\_\_\_

Any information regarding the above loan to effect discharge of the same on the   /  /   and to arrange the release of your mortgage (including all ancillary documentation on your behalf) held over:

**Security Address** \_\_\_\_\_

Our address after the discharge of the above loan will be:

**Residential Address:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

Loan to be reduced (please note fees on reduced amount are incurred. For example discharge fees, processing fees, solicitors fees and other fees and charges may be payable).

**Loan Amount:** \_\_\_\_\_

**Account No:** \_\_\_\_\_

**New Loan Limit:** \_\_\_\_\_

Where applicable, we have returned all of our credit and debit cards (cut in two) and unused cheque forms to you and acknowledge that our accounts (s) may be frozen up to 10 business days prior to settlement. We request (if applicable with a refund of any Loan Mortgage Insurance premium will be forwarded to the above address.

### SIGNED

<b>Signed</b>	<b>*</b>	/ /
<b>Name of Signatory</b>		<b>Dated</b>
<b>Signed</b>	<b>*</b>	/ /
<b>Name of Signatory</b>		<b>Dated</b>