

**IMPORTANT NOTES:**

1. SECTIONS 1 TO 5 MUST BE COMPLETED IN ORDER FOR THIS FORM TO BE ACCEPTED.
2. ALL BORROWERS MUST SIGN THIS DISCHARGE FORM.
3. COMPLETED DISCHARGE AUTHORITIES WILL BE ACTIONED WITHIN 15 BUSINESS DAYS.
4. THIS DISCHARGE AUTHORITY IS VALID FOR 90 DAYS FROM THE DATE ALL BORROWERS SIGN.

**Full Discharge** - Please email completed authority to [discharge@advantagedge.com.au](mailto:discharge@advantagedge.com.au) or fax to **03 9621 1440**

**Partial Discharge** - Please email completed authority to [partialdischarges@advantagedge.com.au](mailto:partialdischarges@advantagedge.com.au) or fax to **03 8618 4427**

<b>Borrower Name(s):</b>	
<b>Loan ID or Loan Number:</b>	

**SECTION 1: Discharge Reason**

- Refinance - Reasons:**  Interest Rate  Customer Service  Other –please specify \_\_\_\_\_  
 Incoming Mortgagee \_\_\_\_\_
- Property Sale** Anticipated Settlement date as per Contract of Sale \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Please attach a copy of the Contract of Sale
- Other**  
 Please specify reason \_\_\_\_\_

**SECTION 2: Security Property to be Discharged**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**If Partial Discharge, Security Property to be Retained**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**SECTION 3: Borrower Representative Contact Details for Discharge Settlement**

- Solicitor/Conveyancer**  **Incoming Mortgagee**  **Acting for self**  
*Please complete details below* *Please complete details below*
- Company \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Telephone Number ( ) \_\_\_\_\_ Facsimile Number ( ) \_\_\_\_\_

**SECTION 4: Borrower Contact Details Post Discharge (for applicable refunds)**

- Mailing Address \_\_\_\_\_  
 Telephone Number ( ) \_\_\_\_\_ Facsimile Number ( ) \_\_\_\_\_  
 Email \_\_\_\_\_
- Banking Details (for any applicable refunds)
- Please deposit in my Account you have on file**
- Please deposit any refunds in the following Account:**
- Name of Account \_\_\_\_\_  
 BSB \_\_\_\_\_ Account Number \_\_\_\_\_

**SECTION 5: Borrower's Authority**

I/we acknowledge that fees and charges including any Additional Valuation Fees may apply which are payable at the time a security is discharged. Where a discharge of security does not proceed, I/we acknowledge that **Advantagedge Financial Services Pty Ltd (AFS)** may debit my/our loan with the Additional Valuation Fee if a valuation was arranged due to my/our initial request to discharge the security. Where the matter is for a partial discharge of security, a Security Variation Fee is payable upon the completion of the partial discharge, which I/we authorise to be: i) debited to my/our loan; or ii) debited to my/our nominated account; at **AFS's** discretion.

- |               |                    |                 |            |
|---------------|--------------------|-----------------|------------|
| Surname _____ | Given Name/s _____ | Signature _____ | Date _____ |
| Surname _____ | Given Name/s _____ | Signature _____ | Date _____ |
| Surname _____ | Given Name/s _____ | Signature _____ | Date _____ |
| Surname _____ | Given Name/s _____ | Signature _____ | Date _____ |