

Discharge Intention



AdelaideBank

CUSTOMER DETAILS

Full name: Adelaide Bank WIN:

Security address/addresses:

OTHER FINANCIAL INSTITUTION DETAILS AND CUSTOMER AUTHORISATION

Name of financial institution:

Contact name: Fax number:

Mortgage number:

Certificate of Title:

Account number:

I/We authorise that you provide Adelaide Bank with any information they may require in respect to our account with you and in particular the full amounts required by you to discharge the mortgage indicated above.
In addition, you are instructed to arrange the preparation of the discharge of my/our Mortgage, to attend settlement and to hand over the discharge of Mortgage and Certificate of Title as requested by Adelaide Bank.
This authority is to remain in force until cancelled in writing by me/us.

CUSTOMER 1

Full name:

Signature:

Date: / /

CUSTOMER 2

Full name:

Signature:

Date: / /

Please Note: Must be authorised by all borrowers and/or mortgagors.

ADELAIDE BANK REQUEST

[OFFICE USE ONLY]

Adelaide Bank intends to advance funds to discharge the above Loan/Mortgage on: / /

Please prepare the discharge of Mortgage in readiness for settlement and advise by return fax the total amount required, including your fees to discharge the loan on this date. South Australian refinances only: Adelaide Bank require a full discharge of mortgage (ie: land and money) where the client is requesting a refinance stamp duty exemption from Revenue SA. Please advise if not possible.

ADELAIDE BANK ASSESSMENT OFFICER

[OFFICE USE ONLY]

Contact name: Department:

Signature: Date sent to other F.I.: / / Telephone:

Please Note: Ensure fax number details are completed at bottom of form

RESPONSE FROM OTHER FINANCIAL INSTITUTION

Balance outstanding: \$

Interest to settlement date: \$

Early discharge fees/Interest: \$

Discharge fee: \$

Total: \$

Please fax your response to: (08)