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Discharge Authority

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.

I. THIS DISCHARGE AUTH	IORITY IS VALID FOR 90 DAYS FROM THE I	DATE ALL BURNOWERS SIGN.			
Full Discharge Plea	ase email completed authority to discharge	e@advantedge.com.au or fax to 03	9621 1440)	
Partial Discharge – P	lease email completed authority to partialdis	charges@advantedge.com.au or fax t	o 03 8618 4	1427	,
Borrower Name(s):					
Loan ID or Loan Number	er:				
Costion 1. Dischare	an Pansan				
Section 1: Discharg	je Keason ns:	vice Other places specify			
	e				
Property Sale					
Please attach a copy	of the Contract of Sale Ant	icipated Settlement date as per Con	tract of Sale		_//
Other: Please specify	y reason				
Costion 2: Cosurity	Dronauty to be Discharged	If Partial Discharge, Secu	rity Proper	tv to	he Retained
	Property to be Discharged	11.	•	-	
		2			
		3			
	er Representative Contact Detai				
Solicitor/Conveyar	ncer Incoming Mortg	agee			
	nov Trease complete details				
Telephone Number ()	Facsimile Number ()			
	er Contact Details Post Discharg	e (for applicable refunds)			
1 m 1 m					
2000000					
Banking details (for any a					
	Account you have on file				
	efunds in the following Account:				
BSB	Account Number	2			
Section 5: Borrowe	er's Authority				
	es and charges including any Additional Valu	uation Fees may apply which are payab	ole at the time a	ı secu	rity is discharged.
Where a discharge of secu	urity does not proceed, I/we acknowledge th	at Advantedge Financial Services Pty L	td may debit m	ıy/our	loan with the
Additional Valuation Fee i	f a valuation was arranged due to my/our in	itial request to discharge the security. \	Where the matt	er is fo	or a partial
i) debited to my/our	curity Variation Fee is payable upon the com	pletion of the partial discharge, which	i i/we authorise	to be	
	ir nominated account;				
at Advantedge's discretion	on.				
Surname	Given Name/s	Signature	Date		/
Surname	Given Name/s	Signature	Date	/_	/
Surname	Given Name/s	Signature	Date	/	/
Surname	Given Name/s	Signature	Date	7	7