

Authority to Discharge



Borrower Name(s) _____

Loan Number(s): _____

Phone Number: _____ Email Address: _____

On the above mortgage loan account, I/we wish to arrange: a partial discharge a full discharge

I/We request that you arrange discharge of the following property(ies): _____

The remaining security(ies) will be: _____

My/Our address for notices after settlement will be: _____

_____ State _____ Postcode _____

For any applicable refunds, we authorise you to deposit the funds to the following account: _____

Account Name: _____ BSB: _____ Account Number: _____

My/Our settlement agent/solicitor acting on my/our behalf is (if applicable): _____

Name: _____

Contact Name: _____ Phone No. () _____

Email Address: _____ Anticipated Settlement Date / /

Discharge Reason: _____

<input type="checkbox"/> Sale	<input type="checkbox"/> Paid in Full	<input type="checkbox"/> Customer Service	<input type="checkbox"/> Other - Please specify
<input type="checkbox"/> Refinance	<input type="checkbox"/> Incoming Bank		<input type="checkbox"/> Offered Interest Rate
<input type="checkbox"/> Mortgage Manager Notified		<input type="checkbox"/> Mortgage Manager's Signature	

Authority and Acknowledgement:

I/we authorise the Lender and Program Manager to initiate the discharge of the Mortgaged Property and I/we acknowledge and agree as follows:

- (a) that we will receive from you a payout amount and other information (as applicable) with respect of the Loan Account to discharge the Mortgaged Property; and
- (b) we will pay the Loan Account and applicable fees and charges payable in accordance with the terms of the Loan Agreement and associated Terms and Conditions; and
- (c) should there be any shortfall in the monies payable under paragraph (b) above we undertake to pay that shortfall within 1 Business Day of being notified of the shortfall.
- (d) have completed all sections on this form to avoid any delays.

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IMPORTANT: The discharge must be completed within a maximum time frame of up to 120 calendar days from the date of us receiving your instruction. In the event that the discharge is not completed within the 120-day period, we will cancel the discharge. Once cancelled, we will promptly return the security packet for safekeeping. Returning the security packet for safe custody will incur a custodian fee which will be charged to your loan account. This fee is to cover the costs associated the administrative handling of the security packet.

Signatures (ALL borrowers must sign)				
Borrower 1 (Name)	Signature	Date	/	/
Borrower 2 (Name)	Signature	Date	/	/
Borrower 3 (Name)	Signature	Date	/	/
Borrower 4 (Name)	Signature	Date	/	/

ONCE COMPLETED PLEASE RETURN TO ORIGIN MORTGAGE MANAGEMENT SERVICES:
Email discharges@originmms.com.au **Tel** 1300 767 023