

Discharge Authority

ADVANTEDGE

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 or fax to ~~03 9262 7827~~ **02 9262 7824**
- Partial Discharge** - Please email completed authority to partialdischarges@advantagedge.com.au or fax to ~~03 9262 7827~~ **02 9262 7824**

Borrower Name(s):	
Loan ID or Loan Number:	

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	If Partial Discharge, Security Property to be Retained
1. _____	1. _____
2. _____	2. _____
3. _____	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 _____



BMC Mortgage Corporation Pty Limited
 7/222 Clarence St, Sydney NSW 2000
 P: 02 9262 7881 F: 02 9262 7884 E: sales@bmcloans.com.au W:www.bmcloans.com.au

Authority to Discharge

Borrower Name(s)

Loan Number(s):

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):

In exchange for \$ _____ being paid to the above loan account

The remaining security(ies) will be:

My/Our address for notices after settlement will be:

State

Postcode

My/Our settlement agent/solicitor acting on my/our behalf is:

Name:

Address:

State

Postcode

Contact Name:

Phone No. ()

Email Address:

Anticipated Settlement Date / /

My/Our reason for discharging the loan is:

Borrower 1 (Name)	Signature	Date	/	/
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Borrower 2 (Name)	Signature	Date	/	/
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Borrower 3 (Name)	Signature	Date	/	/
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Borrower 4 (Name)	Signature	Date	/	/
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