



Authority to Discharge

Borrower Name(s)				
Finance Account:					
Phone Number:		Email Address:			
On the above fina	nce account, I/we wish	to arrange:	a partial discharge	a full discharge	
I/We request that	you arrange discharge	of the following property(ies	s):		
The remaining sec	curity(ies) will be:				
My/Our address fo	or notices after settlem	ent will be:			
			State	Postcode	
For any applicable	e refunds, we authorise	you to deposit the funds to	the following account:		
Account Name:		BSB:	Account	Account Number:	
My/Our settlemer	nt agent/solicitor acting	on my/our behalf is (if appl	icable):		
Name:					
Contact Name:			Phone No. ()	
Email Address:			Anticipated Set	ttlement Date /	1
Discharge Reaso	n:				
Sale	Paid in Full	Customer Service	Other - Please specify		
Refinance	Incoming Bank		Offered Rental Rate		
Mortgage Manager Notified		Mortgage Manager's Signature			

Authority and Acknowledgement:

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

- that we will receive from you a payout amount and other information (as applicable) with respect of the Finance Account to discharge the Financed Property; and
- we will pay the Finance Account and applicable fees and charges payable in accordance with the terms of the Finance Agreement and associated Terms and Conditions; and
- should there be any shortfall in the monies payable under paragraph (b) above we undertake to pay that shortfall within 1 Business (c) Day of being notified of the shortfall.
- 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 finance 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	/	1					
Borrower 4 (Name)	Signature	Date	/	1					

ONCE COMPLETED PLEASE RETURN TO ORIGIN MORTGAGE MANAGEMENT SERVICES:

Email discharges@originmms.com.au **Tel** 1300 767 023 and **Email** discharges@axislending.com.au **Tel** 1300 294 700