

Full/Partial Discharge Authority

Date: _____ / _____ / _____

Debtor/Mortgagor Details

Full Name of Debtors/Mortgagors: _____

Mailing Address for Correspondence after Settlement: _____

Suburb/Town: _____ State: _____ Postcode: _____

Guarantor Details

Full Name of Guarantors (if any): _____

Security Release Details

Type of Release: Full Partial

I/We hereby request the release of the mortgage over my/our property situated at:

1. _____

2. _____

3. _____

I/We acknowledge that I/we am/are required to provide National Mortgage Market Corporation Pty Ltd with this fully completed and signed Full/Partial Discharge Authority at least **21 days prior to the settlement date** and/or release of security. If National Mortgage Market Corporation Pty Ltd does not receive sufficient notice settlement may be delayed.

The Legal Representative is required to email Dischargebookings@bendigoadelaide.com.au for a settlement booking.

Reason for payout: Refinance – Financial Institution name _____
 Sold – Anticipated Settlement Date on contract _____ / _____ / _____
 Paid in full: Collect documents from _____ Branch
 Discharge to be registered by the Bank (fee to be included in payout)

Please specify which loan(s)/Facility(s) are to be paid out or to be reduced

Loan Facility Account Number:

_____ Is to be paid out in full: Yes No If No, the desired amount to be paid*: \$ _____

_____ Is to be paid out in full: Yes No If No, the desired amount to be paid*: \$ _____

_____ Is to be paid out in full: Yes No If No, the desired amount to be paid*: \$ _____

* National Mortgage Market Corporation will confirm the exact amount required

Legal Representative/Agent Details

Company Name: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Declaration

I/We:

- Understand that if any error has been made in calculating the settlement amount, that I/we are liable for any amount outstanding.
- Authorise National Mortgage Market Corporation Pty Ltd to provide the Legal Firm/Financial Institution as detailed above (where applicable), as my/our authorised representative, with any information they require about the above account/s and to hand Loan Facility/ies documentation to them (or their nominated agent) upon settlement.
- Agree that a Discharge Administration Fee of \$350.00 applies in relation to each security that I/we request you to partially or fully release or discharge, and to each loan account that I/we request you to close as a result of that release or discharge. I/We agree that this fee will be debited to my/our first loan account from which the security is released (whether or not that loan account is closed as a result of the release or discharge) and also to any additional loan account that is closed as a result of the release or discharge. I/We acknowledge that the fee is payable after that as part of each applicable loan account balance. I/We also agree that if a National Credit Code applies to my/our loan contract and the loan contract was provided to me/us prior to 1 September 2005, the Discharge Administration Fee(s) may apply instead of Legal Fees.

Signature: _____	Full Name: _____	Date: / / _____
Signature: _____	Full Name: _____	Date: / / _____
Signature: _____	Full Name: _____	Date: / / _____
Signature: _____	Full Name: _____	Date: / / _____

Note: Where the Debtor and Mortgagor are identical, the mortgagor only needs to sign.

All parties to the loan must sign this Full/Partial Discharge Authority or settlement will NOT proceed.

Please return to NMMC at 120 Harbour Esplanade, Docklands Vic 3008 or fax 03 8414 7252 or email to loanadministration@nmmc.com.au. Please call 1800 061 091 if you have any queries.

Office Use Only

Staff Name: _____	ADM No.: _____
Staff Signature: _____	Date: / / _____