

# Discharge Intention Form

Ver 1.5 Issued Date: 15/11/07

**Once ORIGINAL form and all information is received we require minimum twenty one (21) days to process. Please post completed form to Locked Bag 7640 GCMC QLD 9726**

We require **written confirmation** from your Solicitor(s)/Financier(s) an original signed copy of this form and a copy of the Contract of Sale (where applicable) in order to prepare the discharge in readiness for settlement. Until all information is received Mortgage Ezy is unable to process the request, which may result in settlement being delayed.

TO: Loans Manager – Mortgage Ezy

RE: Account Name(s): (1) \_\_\_\_\_  
Surname Given Name(s)

(2) \_\_\_\_\_  
Surname Given Name(s)

Loan Number:

Security Address to be released:

Solicitor/Financier:  
  
Phone:(\_\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_\_) \_\_\_\_\_

I/We intend to **DISCHARGE** the above Loan/Mortgages, and I/WE therefore request you provide the amount required to discharge the Mortgage(s), including your fees for an anticipated settlement date of:

\_\_\_\_\_.  
Date Month Year

Payout Figure (incl. interest charges & fees): **\$ TO BE CONFIRMED**

Outstanding Arrears: **\$ TO BE CONFIRMED**

I/We authorize that you provide \_\_\_\_\_ with any information  
Solicitor(s)/Financier(s) Name  
they may require in respect to my/our account with you and in particular the full amounts required by you to discharge the Mortgage indicated above.

In addition, you are further authorised and instructed to arrange the preparation of the discharge of my/our mortgage, to attend settlement and hand over the discharge of Mortgage and Certificate of Title as requested by

\_\_\_\_\_  
Solicitor(s)/Financier(s) Name

I/We advise that it is my/our intention that this authority remain in force until CANCELLED IN WRITING by myself/ourselves.

**Please note that accounts may be frozen five days prior to settlement while payout figures are calculated.**

New address after settlement: \_\_\_\_\_

New Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Borrower Signature: \_\_\_\_\_ Borrower Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ /20

Date: \_\_\_\_\_ / \_\_\_\_\_ /20

**Please confirm if there are any change of address or telephone numbers after discharge to allow for the delivery of final statements and refunds if any.**

ABN 84 066 631 169

Phone 1300 303 EZY (399)

Email [discharges@mortgageezy.com.au](mailto:discharges@mortgageezy.com.au)

Mail Locked Bag 7640 GCMC 9726

Fax (07) 5592 5633

Web [www.mortgageezy.com.au](http://www.mortgageezy.com.au)

Level 21, 50 Cavill Ave

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