Authority to Discharge



Borrower Name(s)						
Loan Number(s):						
Phone Number:	Email Address:					
On the above mortgage loa	an account, I/we wis	sh to arrange: 📃 a pa	rtial discharge 📃 a full	discharge		
I/We request that you arran	ge discharge of th	e following property(ie	es):			
In exchange for \$	being paid to the above loan account					
The remaining security(ies)	will be:					
My/Our address for notices	after settlement w	vill be:				
			State	Postc	ode	
My/Our settlement agent/s	olicitor acting on n	ny/our behalf is:				
Name:						
Address:			State	Postc	ode	
Contact Name:			Phone No. ()		
Email Address:	Anticipated Settlement Date / /				/	
Discharge Reason:						
Refinance - Reasons	Interest Rate	Customer Service	Other - please specify	y		
Incoming Bank			Interest Rate			
Mortgage Manager Notified	ł	Mortgage Manage	's Signature			
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 GRANITE HOME LOANS: Tel 1300 737 058 Email service@granitehomeloans.com.au