

St.George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

Use this form to request the amendment to securities held against existing St.George Bank mortgages.

Full Discharge	ge of Security Please complete sections A - E, H - L			Please Fax your completed request to 02 9995 8300.			
Partial Discha	arge of Security	Please complete secti	ons A - E, F, H - L	Please Fax your completed request to 02 9995 If a sale, please provide Contract of Sale.			
Substitution	of Security	Please complete sections A - E, F, G, H - L Please Fax your con		ompleted request to 02 9995 8304. ontract of Sale, Transfer and Title Search			
		eted application to: ges, Locked Bag 1, Koga	orah, NSW 1485.				
A. Type of Request		n for the release of secu efinance D Other	urity?				
B. Account and Security Details							
C. Requestor Details Customer Contact Details - of person acting on the customer's behalf Full Name							
	Company Name Unit/Street No. Street Name						
	Suburb				State	Postcode	
	Phone No.		Mobile No.		Fax No.		
	Email Address						
	Preferred contact method Mail Mobile Phone Email Fax						
D. Customer Details	Customer 1 Full Name			Customer 2 Full Name			
	Contact No.			Contact No.			
	Customer 3 Full Name			Customer 4 Full Name			
	Contact No.			Contact No.			

9624/11687 C12/09 Page 1 of 5



St.George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

	Security Property Unit/Street No.	1 Street Name					
	Suburb			State	Postcode		
	Title Reference		Current estimated sa	le price			
	Security Property 2						
	Unit/Street No.	Street Name					
	Suburb			State	Postcode		
	Title Reference		Current estimated sa	le price			
	Security Property 3 Unit/Street No. Street Name						
	Suburb			State	Postcode		
	Title Reference		Current estimated sa	le price			
	Security Property 4						
	Unit/Street No.	Street Name					
	Suburb			State	Postcode		
	Title Reference		Current estimated sa	le price			
	Is/Are the Security(ies) listed above used as collateral against any other home loan account? Yes No If you answered Yes, then please specify Account Nos.						

9624/11687 C12/09 Page 2 of 5



St.George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

F. Remaining	Please provide details of all remaining properties.							
Properties	Note: A valuation may need to be ordered on one or more of the remaining properties before this request can be							
	completed. Property 1							
	Unit/Street No.	Street Name						
	Suburb			State	Postcode			
	Current estimated	d market value						
	Property access d	letails						
	Contact Name		Contact No.	Contact No.				
	Property 2							
	Unit/Street No.	Street Name						
		_						
	Suburb I			State I	Postcode I			
	Current estimated	l market value						
	\$							
	Property access d Contact Name	letails	Contact No.	Contact No.				
	Contact Name		Contact No.	Contact No.				
	Property 3	Street Name						
	Unit/Street No.	Street Name						
	Suburb			State	Postcode			
					l			
	Current estimated market value							
	\$							
	Property access d	letails						
	Contact Name		Contact No.	Contact No.				
	Property 4							
	Unit/Street No.	Street Name						
	Suburb			State	Postcode			
	Current estimated	d market value						
	\$							
	Property access d	letails						
	Contact Name I		Contact No.	Contact No.				

9624/11687 C12/09 Page 3 of 5



St.George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

G. Substitution Details	Please provide the details of what you wish to substitute the security with. Property - please provide details below Term Deposit/Cash Are you buying the property from a friend or relative? Yes No Is the property zoned for residential use? Yes No Unit/Street No. Street Name					
	Suburb	State Postcode				
	Title Reference	Current estimated market value or purchase price \$				
	If you are not purchasing the property, please provide the Contact Name	e Property Access details. Contact No.				
	ement Note: If multiple security properties are to be released on different settlement dates then a separate reque Details lodged for each property.					
	Please enter the anticipated settlement date (if known) and the city or branch where settlement is due to occur (please do NOT enter a State).					
	Anticipated Settlement Date DD/MM/YYYY	Settlement Branch/City				
I. Funds Distribution and Accounts	Complete this section to advise us of your intentions to disburse the funds received from the settlement. Account No. Account Name					
	Convert to Savings Account (portfolio only)	Reduce debt to \$				
	☐ Close Loan Account ☐ Close all accounts (packaged only)	OR Reduce debt by \$				
	Account No.	Account Name				
		Reduce debt to \$ OR Reduce debt by				
	Close all accounts (packaged only) Account No.	Account Name				
	Convert to Savings Account (portfolio only) Close Loan Account	Reduce debt to \$ OR				
	Close all accounts (packaged only)	Reduce debt by \$				
	Account No.	Account Name				
	Convert to Savings Account (portfolio only)	Reduce debt to \$				
	☐ Close Loan Account ☐ Close all accounts (packaged only)	OR Reduce debt by \$				

9624/11687 C12/09 Page 4 of 5



St.George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

J. Surplus Funds	How do you wish to receive any surplus funds?						
	Existing St.George Account Account No. Account Name						
	Account No.			Account Name			
	Bank Cheque by	y Mail (please enter a mailin	g address belo	w)			
	Unit/Street No. Street Name						
	Suburb				State	Postcode	
K. Additional Information	Please enter any ac	Iditional information relate	d to the matte	r.			
L. Terms and	I confirm that I	am the customer listed abov	e and I author	ise St. George Bank t	o act in accordance	with my	
Conditions	instructions.			_		-	
		gree that the provision of pe ent which I have previously a					
		e at http://webapps.stgeor	-			-	
	I am aware that there may be fees or charges applicable to this request (as described in the Loan Offer letter) and I agree to continue with this request.						
	L confirm that Lam the Solicitor/Agent acting on behalf of the customer/s listed above, and I hold authorisation from						
	 ☐ I confirm that I am the Solicitor/Agent acting on behalf of the customer/s listed above, and I hold authorisation from the customer(s) for the Bank to act in accordance with my instructions. ☐ I confirm and agree that the provision of personal details in this request form is subject to the terms of the St.George Privacy Statement which the customer has previously agreed to. A copy of the same can be obtained from a St.George Bank branch or online at http://webapps.stgeorge.com.au/apply-now/privacy_business.asp 						
		there may be fees or charge ontinue with this request.	es applicable t	o this request (as des	cribed in the Loan O	offer letter)	
		ner/Solicitor/Agent					
	X						
	Date			-			
	/ /						

9624/11687 C12/09