



Discharge Authority Form

A minimum of 10 working days from receipt of this notice is required to arrange for discharge settlement

Borrowers Details

Borrowers Name(s) in full:

Name of borrower: Contact Number:

Mailing Address after settlement:

Suburb: State: Postcode:

Settlement Details

Property Sold (please attach copy of contract of sale) Refinance Using own funds to pay out loan

Loan number(s) to be paid out:

Property Address:

Suburb: State: Postcode:

Financial Institution/Solicitor handling Settlement:

Contact Name: Contact Number:

Declaration

Note: This declaration must be signed by all parties to the Loan(s), all borrowers/guarantors

I/ We/The Company:

- Understand that if any error has been made in calculating the settlement amount, that I/We/the Company are liable for any amount outstanding;
- Authorise Breez Finance Corporation Pty Ltd to provide the Financial Institution/Solicitor above (if applicable) as my/our authorised representative with any information they require about this account and to hand loan and facility(s) documentation to them upon settlement.
- Acknowledge Breez Finance Corporation Pty Ltd may cancel my Direct Debit prior to settlement.

Full Name (please print)	<input type="text"/>	Signature	<input type="text"/>
Full Name (please print)	<input type="text"/>	Signature	<input type="text"/>
Full Name (please print)	<input type="text"/>	Signature	<input type="text"/>
Full Name (please print)	<input type="text"/>	Signature	<input type="text"/>