

Document Release Form

Solicitors / Conveyancers

This is to request information or apply for release of documentation on behalf of a client.

Please:

- 1. Complete this form <u>or</u> provide us with your letterhead identifying your firm, for whom you act and what you are seeking on behalf of your client; and
- 2. Provide separate written authority from your client confirming documents requested and any further documentation stated in the **Note** below to be forwarded to your firm:

Your D	etails:			
Firm/Cor	npany Na	ame:		-
Address:				-
Signatur	ə:		Date:	_
<u>AND</u>				
Client's F	Full Name	e:		_
Address:				-
Signature	ə:		Date:	_
Date of E	Birth:			
Declarat	ion: I de	clare that this	information is true and correct.	
Informa	tion Da	auirad		
		-	or the following (please tick):	
·		•	of the following (please tick).	
Original	Сору	Information		
			* Will	_
			Power of Attorney	
			** Title for the property at	
			Lease/s for the property at	_
			Trust Deed/s for	_
			Probate for	
П	П	П	Court Orders for	
			Other (please specify)	_

Note: Whilst you may request the above information, there is no certainty that we are able to comply with your request.

You confirm your firm has taken reasonable steps to verify the identity of your client/s.

- (a) It is recommended requested documents are collected or provide us with your prepaid express post/registered mail envelope.
- (b) * If requesting the Will of a deceased person, we require a certified copy of the death certificate.
- (c) **If requesting a Title: (i) if the Title is in more than one name, provide written authority from all parties together with, if applicable, a certified copy of the Grant of Probate/Letters of Administration if a proprietor is deceased or certified copy of Enduring Power of Attorney for the registered proprietor/s; (ii) if the Title is in a company name, use the Company document release form; and (iii) Titles are recommended to be collected.