## **Borrower Discharge Authority Form**



## **About this Discharge Authority Form**

Bluestone Mortgages requires that you provide us with authority to complete certain documents to discharge your loan. By agreeing to this you will enable us to complete all necessary documents.

PLEASE FAX THIS FORM TO BLUESTONE AT (02) 8115 5943.

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Borrower details								
Borrower (1) Full name:								
Borrower (2) Full name:								
Borrower (3) Full name:								
Borrower (4) Full name:								
Contact Name:		Daytime No. ( )						
Current Home Address:								
Postcode:								
Bluestone Loan Account to be closed: 1.		2.						
Property(ies) to be released								
Property (1)								
				Postcode				
Property (2)								
				ostcoc	le			
Sale/Refinance of Property(ies)								
Have you sold the property or are you refinancing with another lender? (please tick)				old		Refinance		
Are you paying out all your Bluestone loan at settlement?			Y	es		No		
If No, are you supplying Bluestone with add	itional security?		Y	es		No		
If Yes please supply details.								
Address after settlement:								
					Postcode:			
Solicitor/conveyancer/new lender	details							
Company:	Ref. No	Cont			ntact name:			
Telephone:	Fax:		Email:					
Signing this Authority								
I/we declare that statements made are correas instructed and to discharge the above so from me/us. I/we acknowledge that this of	ecurity to clear/reduce	my/our Bluestone Loa	an(s) wi	ithout	any furthe	r written au	thority	
payment of any applicable fees.								
Date:		Date:						
Name:		Name:						
Borrower I			В	orrowe	er 2			
Signed:		Signed:						
Date:		Date:						
Name:		Name:						
Borrower 3			В	orrowe	er 4			
Signed:		Signed:						

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