

LAND TITLES

OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety

CANCELLATION OF A UNITS PLAN

Form 075 - CUP

Land Titles Act 1925



IMPORTANT INFORMATION

This form is to be used to lodge a cancellation of a units plan under the *Land Titles Act 1925* (the Act). You can access the Act at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

PRIVACY INFORMATION

The Act authorises the Registrar-General to collect the information required by this form. The Registrar-General provides identifiable information to various agencies including, but not limited to, the ACT Planning and Land Authority, ACT Treasury, Canberra Connect and ACTEWAGL for conveyancing, municipal account administrative, statistical and valuation purposes. These agencies may also use this information to prepare and sell property sales reports to commercial organisations concerned with the development, sale or marketing of land.

CONTACT INFORMATION

Lodge in person at the **Office of Regulatory Services:** 255

Office Hours:

General enquiries telephone number:

Website address:

255 Canberra Avenue, Fyshwick ACT 2609 9:00am to 4:30pm Monday to Friday

(02) 6207 0491

www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- The certificate of title for the common property and each unit is required for lodgement of this form.
- All information should be typed or clearly printed. If completing this form by hand please use a solid black pen only.
- This office will not accept lodgement of this form if it is not completed in full.
- Any alteration to information provided on this form must be struck through with a black pen. Substitute information must be clear and all parties must sign in the margin. Do not use correction fluid or tape.
- Ensure all required documents are attached. If there is insufficient space in any panel, please use an Annexure Sheet.
- Execution by:
 - a) A Natural Person Should be witnessed by an adult person who is not a party to the document.
 - b) Attorney if this document is executed by an Attorney pursuant to a registered power of attorney, it must set out the full name of the attorney and the form of execution must indicate the source of his/her authority e.g. "AB by his/her attorney XY pursuant to Power of Attorney ACT Registration No...... of which he/she has no notice of revocation". (This execution requires a witness).
 - c) **Corporation** Section 127 of the *Corporations Act* provides that a company may now validly execute a document with or without using a Common Seal if the document is signed by:
 - i. Two directors of the company;
 - ii. A director and a secretary of the company; or
 - iii. Where the company is a proprietary company and has a sole director who is also the sole company secretary, that director. (No witness is required for this execution).
- The following forms of execution are suggested –

a)	with A Common Seal				
	The common seal of ABC Pty Ltd/Ltd ACN				
	was affixed in the presence of-				
	(signature)				
	(director/secretary)*				
	(*repeat if necessary i.e. if two directors signing. If signing as sole director and sole secretary, state				
	'director/secretary') - (No witness is required for this execution).				
b)	Without A Common Seal				
	Signed by ABC Pty Ltd/Ltd ACN				
	(signature)				
	(director/secretary)*				
	(*repeat if necessary i.e. if two directors signing. If signing as sole director and sole secretary, state				
	'director/secretary') - (No witness is required for this execution).				



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LODGING PARTY DETAILS							
Name		Postal Address			Contact Telephone Number		
TITLE AND LAND DE	ETAILS						
Volume & Folio		istrict/Division Section Block		Block	UNITS PLAN NUMBER		
CANCELLATION AU' (Please tick appropriate		ned copy must be supplied)	COMMON SEAL OF OWNERS CORPORATION (Seal must be affixed)				
Cancellation aut	hority from A	CTPLA					
☐ Magistrates Cou	ırt Order No						
Special Resolution	on						
Other (specify) -							
EXECUTION BY OWNERS CORPORATION USING A COMMON SEAL (The Common Seal was affixed in the presence of)							
Signature			Signature				
Full Name (Block Letters)		Full Name (Block Letters)				
Address			Address				
Office Held			Office Held				
OFFICE USE ONLY							
Lodged by			Certificate of t	itle lodged			
Data entered by			Certificates att				
Registered by			Attachments /				
Registration date			Production nu				