

LAND TITLES OFFICE OF REGULATORY SERVICES

Department of Justice and Community Safety

APPLICATION TO REMOVE / WITHDRAW A WRIT



Form 082 - RW

Land Titles Act 1925

IMPORTANT INFORMATION

This form is to be used to lodge an application to remove/withdraw a writ 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 Canberra Avenue, Fyshwick ACT 2609
Office Hours: 9:00am to 4:30pm Monday to Friday

General enquiries telephone number: (02) 6207 0491
Website address: www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- This certificate of title is not required for lodgement of this document.
- 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. (This execution does not require a witness).
- 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') – (This execution does not require a witness).
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') – (This execution does not require a witness).



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LODGING PARTY D	ETAILS							
Name		P	Postal Address			Contact Telephone Number		
TITLE AND LAND DETAILS								
Volume & Folio		istrict/Division Section		Blo	Block Unit			
WRIT INSTRUMENT NUMBER TO BE REMOVED / WITHDRAWN (associated dealing number)								
FULL NAME AND ADDRESS OF APPLICANT (Surname Last) (ACN required for all Companies)								
DETAILS OF REMOVAL / WITHDRAWAL								
Court Order Number								
Evidence that the Judgement Creditor agrees to the removal of the Writ								
Statutory Declaration attached								
EXECUTION								
Print full name of a	pplicant	Print full name and address of witness						
Signature or commo	on seal of app	Signature of witness	Signature of witness					
Dated -			Dated -	Dated -				
OFFICE USE ONLY			1					
Lodged by			Certificate of title lod	lged				
Data entered by			Certificates attached					
Registered by			Attachments / Annex					
Registration date			Production number					