



**NOTICE OF DEATH BY SURVIVING PROPRIETOR ON A MORTGAGE**

Form 069 - NDM

Land Titles Act 1925

**IMPORTANT INFORMATION**

This form is to be used to lodge a notice of death by surviving proprietor on a mortgage under the *Land Titles Act 1925* (the Act). You can access the Act at [www.legislation.act.gov.au](http://www.legislation.act.gov.au) or obtain more information from [www.act.gov.au/accesscbr](http://www.act.gov.au/accesscbr).

**PRIVACY INFORMATION**

The Act authorises the Registrar-General to collect the personal information required by this form for the purposes of issuing a registration under the Act. The Registrar-General prevents any unreasonable intrusion into a person’s privacy in accordance with the *Information Privacy Act 2014*. The Registrar-General provides identifiable information to law enforcement and other Directorates that have legal authority to request information under prescribed circumstances. 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.

**INSTRUCTIONS FOR COMPLETION**

- Original registered Death Certificate or certified true copy of original must be supplied with lodgement of this form.
- The 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).

**LODGE MENT AND CONTACT INFORMATION**

**Email:**  
[actlandtitles@act.gov.au](mailto:actlandtitles@act.gov.au)  
**General Enquiries:**  
(02) 6207 3000

**In Person:**  
Environment, Planning and Land Shopfront  
Ground Floor South, Dame Pattie Menzies House, 16 Challis Street, Dickson  
Opening hours - Monday to Friday 8:30am to 4:30pm (excluding public holidays)



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LODGING PARTY DETAILS		
Name	Postal Address	Contact Telephone Number

TITLE AND LAND DETAILS				
Volume & Folio	District/Division	Section	Block	Unit

REGISTERED MORTGAGE NUMBER (Associated Dealing Number)

FULL NAME OF SURVIVING TENANT/S (Surname Last) (ACN required for all companies)	FULL POSTAL ADDRESS (including post code)

FULL NAME OF DECEASED (Surname Last)	DATE OF DEATH

SURVIVING TENANT/S EXECUTION	
Print full name of surviving tenant	Print full name and address of witness
Signature or common seal of surviving tenant	Signature of witness
Dated -	Dated -

OFFICE USE ONLY			
Lodged by		Certificate of title lodged	
Data entered by		Certificates attached to title	
Registered by		Attachments / Annexures	
Registration date		Death certificate sighted	