





## **CAVEAT OF A SUBLEASE OR UNDERLEASE**

Form 060 - XSL									1	Land Titles Act 1925	
LODGING PARTY D	ETAILS										
Name		Email Address					Customer Reference Number		Cont	act Telephone Number	
TITLE AND LAND D	ETAILS										
Volume & Folio	io District/		Division Sect		tion	В	Block Uni			Registered Sublease / Underlease Number	
REGISTERED LESSEE/S (Surname Last) (ACN required for all companies)					FULL POSTAL ADDRESS (including postcode)						
CAVEATOR (Surname Last) (ACN required for all companies)					FULL POSTAL ADDRESS (including postcode)						
FORM OF TENANCY — (to be completed where more than one Caveator is listed)											
Joint Tenants Tenants in Common in (the following shares) - (Please state Caveator's name and shares out in full)											
ADDRESS FOR SERVICE OF NOTICES FOR THE CAVEATOR (Must be an address in the Australian Capital Territory – including postcode)					EMAIL ADDRESS FOR SERVICE OF NOTICES FOR THE CAVEATOR (optional)						
NATURE OF THE ES	TATE C	RINTERES	T IN THE LAND	(for inform	nation, see	guidano	ce notes)				
REPRESENTING SO	ыато	R DETAILS!	FOR CAVEATOR	(Complete	if applica	ble – oth	nerwise stat	e below "Not App	olicable")		
Name of Firm				Solicitor Email Addres			is		Solicito	or Name	
ACTION REQUIRED	BY TH	IS CAVEAT	(Tick the appropriate	e box – one	e box sho	uld be Ti	icked)				
(a) Prevention of all instruments with the land (refer to statutory exceptions							verleaf).				
(b) Prevention of all instruments with the land other than those dealings as identified at							ified at <i>S10</i>	04(5) Land Titles Act 1925			
(c) Prevention of instruments as follows;											

CERTIFICATION * Delete the inapplicable				
Caveator				
*The Certifier has taken reasonable steps to verify the identity of the Caveator or his, her or its administrator or attorney.  *The Certifier has retained the evidence to support this Registry Instrument or Document.  *The Certifier has taken reasonable steps to ensure that the Registry Instrument or Document is correct and compliant with relevant law and any Prescribed Requirement.				
Signed By:				
<name certifying="" of="" party=""> <capacity certifying="" of="" party=""></capacity></name>				
for: <company name=""></company>				
on behalf of the Caveator				

OFFICE USE ONLY						
Lodged by		Registered date / by				
Data entered by		Attachments/Annexures				