



DETERMINATION/SURRENDER OF A CROWN LEASE

Form 057 - DCL

Land Titles Act 1925

LODGING PARTY DETAILS			
Name	Email Address	Customer Reference Number	Contact Telephone Number

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

FULL NAME OF LESSEE/S (Surname Last) (ACN required for all Companies)	THE SELLER VERIFICATION DECLARATION HAS BEEN SUBMITTED (must be completed prior to lodgement of this document)
	Submission Date: Reference Code:
	Submission Date: Reference Code:

CONSIDERATION (Please provide monetary sum and/or reason for surrender)	CONSENTING PARTY – SUPPORTING DOCUMENTATION (One form required for each party required to consent)
	<input type="checkbox"/> Please complete and attach – Form 042 – C – Consent

DEVELOPMENT STATUS (Tick the appropriate box – one box must be completed)	LAND USE (Tick the appropriate box – one box must be completed)
<input type="checkbox"/> Land Only <input type="checkbox"/> Incomplete Building <input type="checkbox"/> Building Completed	<input type="checkbox"/> Residential <input type="checkbox"/> Rural <input type="checkbox"/> Commercial

CERTIFICATION *Delete the inapplicable	
Lessor/ACT Planning and Land Authority	
*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:	Witnessed By (signature):
Delegate of Authority Position Number:	Full name of Witness:
for: ACT Planning and Land Authority	

CERTIFICATION *Delete the inapplicable

Lessee

- * The Certifier has taken reasonable steps to verify the identity of the Lessee or his, her or its administrator or attorney.
- * The Certifier holds a properly completed Client Authorisation for the Conveyancing Transaction including this Registry Instrument or Document.
- * 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 of certifying party>

<Capacity of certifying party>

for: <Company name>

on behalf of the Lessee

DATE**OFFICE USE ONLY**

Lodged by		Registered date / by	
Data entered by		Attachments/Annexures	