



## APPLICATION TO NOTE WITHDRAWAL/ACQUISITION

Form	095	- WA
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Land Titles Act 1925

## LODGING PARTY DETAILS

Name	Email Address	Customer Reference Number	Contact Telephone Number

TITLE AND LAND DE	TAILS				
Volume & Folio	District/Division	Section	Block	Unit	DP Number

FULL NAME AND ADDRESS OF REGISTERED PROPRIETOR (Surname Last) – (ACN required for all companies) post code must be included

AREA WITHDRAWN/AQUIRED (Attach copy of gazettal notice)	DATE

EXECUTION BY ACT PLANNING AND LAND AUTHORITY			
CERTIFICATION			
*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			

OFFICE USE ONLY				
Lodged by		Registered by		
Data entered by		Registration date		