



EXPIRY OF CROWN LEASE

102 - ECL

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 AND POSTAL ADDRESS OF REGISTERED PROPRIETOR/S (Surname Last) (ACN required for all companies)

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EXPIRY DATE OF CROWN LEASE

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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	