

LAND TITLES OFFICE OF REGULATORY SERVICES Department of Justice and Community Safety

VESTING

Land Titles Act 1925



Form 086 - V

Luna Titles Act 132.

IMPORTANT INFORMATION

This form is to be used to lodge a vesting under the *Land Titles Act 1925* (the Act). You can access the Act at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

PRIVACY INFORMATION

The Act authorises the Registrar-General to collect the information required by this form. The Registrar-General provides identifiable information to various agencies including, but not limited to, the ACT Planning and Land Authority, ACT Treasury, Canberra Connect and ACTEWAGL for conveyancing, municipal account administrative, statistical and valuation purposes. 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.

CONTACT INFORMATION

Lodge in person at the Office of Regulatory Services: 255 Canberra Avenue, Fyshwick ACT 2609
Office Hours: 9:00am to 4:30pm Monday to Friday

General enquiries telephone number: (02) 6207 0491
Website address: www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- Depending on the type of application, the certificate of title/s may be 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 Seai
	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)



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LODGING PARTY DETAILS								
Postal Address			Contact Tolophone Number					
rost	Postal Address			Contact Telephone Number				
TITLE AND LAND DETAILS								
District/Division	Section	Block		Unit				
FULL NAME AND ADDRESS OF APPLICANT (Surname Last) (ACN required for all companies) (including post code)								
STATUTE DETAILS (Please tick the appropriate box)			GLOBAL CHANGE (Please tick the appropriate box)					
Complementary legislation passed; Succession day must be fixed by the Treasurer by			Change all references on mortgages					
notice in the Gazette; and Certificate signed by the authorised person, specifying			Change all references to the Proprietor					
the land or interest; and stating that a specified asset has become a transferred asset or transferred liability of the "Receiving Bank" or "Transferring Bank".			☐ Change all references					
COURT ORDER								
ant and attach a copy)	Court Order Number							
FULL NAME AND ADDRESS OF REGISTERED PROPRIETOR / MORTGAGEE (Surname Last) (ACN required for all companies) (including post code)								
, , , , , , , , , , , , , , , , , , , ,								
FULL NAME AND ADDRESS OF RECEIVING PROPRIETOR / MORTGAGEE (Surname Last) (ACN required for all companies) (including post code)								
	ppropriate box) passed; fixed by the Treasurer by uthorised person, specifying tating that a specified asset asset or transferred liability "Transferring Bank". ant and attach a copy) EGISTERED PROPRIETOR / Management of the properties of the	ppropriate box) GLOBAL CHANGE (Ple passed; fixed by the Treasurer by Uthorised person, specifying tating that a specified asset asset or transferred liability "Transferring Bank". Court Order Number CECEIVING PROPRIETOR / MORTGAGEE DECEIVING PROPRIETOR / MORTGAGEE	District/Division Section Block APPLICANT (Surname Last) (ACN required for all companies) (including post of properties box) GLOBAL CHANGE (Please tick the appropriate box) passed; fixed by the Treasurer by Change all references on motorised person, specifying tating that a specified asset asset or transferred liability "Transferring Bank". Court Order Number - COURT Order Number - COURT Order Number - COURT ORDER OF COURT ORDER CECIVING PROPRIETOR / MORTGAGEE CECEIVING PROPRIETOR / MORTGAGEE	District/Division Section Block APPLICANT (Surname Last) (ACN required for all companies) (including post code) Appropriate box) GLOBAL CHANGE (Please tick the appropriate code) Change all references on mortgages change all references on subleases cathorised person, specifying tating that a specified asset asset or transferred liability change all references Change all references to the Propriet change all references Change all references				

FORM OF TENANCY (if applicable – only complete if more than one receiving proprietor / mortgagee)								
DATE								
APPLICANT'S EXECUTION								
Print full name of applicant		Print full name and address of witness						
Signature or common seal of a	pplicant	Signature of witness						
OFFICE USE ONLY								
Lodged by		Certificate of title lodged						
Data entered by		Certificates attached to title						
Registered by		Attachments / Annexures						
Registration date		Production number						