

## LAND TITLES OFFICE OF REGULATORY SERVICES

Department of Justice and Community Safety

### **VARIATION OF EASEMENT**

Form 040 - VE

Land Titles Act 1925



#### IMPORTANT INFORMATION

This form is to be used to lodge a variation of easement under the *Land Titles Act 1925* (the Act). You can access the Act at <a href="https://www.legislation.act.gov.au">www.legislation.act.gov.au</a>. You may also obtain further information and forms at <a href="https://www.ors.act.gov.au">www.ors.act.gov.au</a>.

#### **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

- The certificate of title is not required to be lodged with 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 Seal
	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).



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

## VARIATION OF EASEMENT

	Office of REGULATORY SERVICES
DEPARTMENT OF	

Form 040 - VE

Land Titles Act 1925

LODGING PARTY DETAILS									
Name		Postal Address			Contact Telephone Number				
TITLE AND LAND DETAILS SERVIENT TENEMENT / GRANTOR									
Volume & Folio	С	istrict/Division	Section	Block		Unit			
TITLE AND LAND DETAILS DOMINANT TENEMENT / GRANTEE									
Volume & Folio	С	istrict/Division	Section	Block		Unit			
REGISTERED NUMBER OF EASEMENT TO BE VARIED (Associated Dealing Number)									
FULL NAME AND ADDRESS OF APPLICANT / GRANTOR / SERVIENT TENEMENT (Surname Last) (ACN required for all Companies)									
FULL NAME AND ADDRESS OF GRANTEE / DOMINANT TENEMENT (Surname Last) (ACN required for all Companies)									
<b>DETAILS OF VARIATION</b> (Please outline briefly and add full detail on annexure page with plan as attachment)									

The applicant hereby apply to vary the easement as described briefly below and in the attached plan –

CONSENTING PARTY – SUPPORTING DOCUMENTATION							
Please complete and attach – Form 042 – C – Consent (One form required for each party required to consent)							
DATE							
EXECUTION BY GRANTOR / SI	ERVIENT TENEMENT						
Print full name of grantor / se	rvient tenement	Print full name and address of witness					
Signature or common seal of ${\mathfrak g}$	grantor / servient tenement	Signature of witness					
EXECUTION BY GRANTEE / DO	DMINANT TENEMENT						
Print full name of grantee / do	ominant tenement	Print full name and address of v	vitness				
Signature or common seal of a	grantee / dominant tenement	Signature of witness					
OFFICE USE ONLY							
		I					
Lodged by		Certificate of title lodged					
Data entered by		Certificates attached to title					
Registered by		Attachments / Annexures  Consent form attached					
Registration date		Consent form attached	1				