

## TRANSMISSION APPLICATION

Form 032 - TA

*Land Titles Act 1925*

### IMPORTANT INFORMATION

This form is to be used to lodge a transmission application under the *Land Titles Act 1925* (the Act). You can access the Act at [www.legislation.act.gov.au](http://www.legislation.act.gov.au). You may also obtain further information and forms at [www.act.gov.au/accesscbr](http://www.act.gov.au/accesscbr).

### PRIVACY INFORMATION

The Act authorises the Registrar-General to collect the personal information required by this form for the purposes of issuing a registration under the Act. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Information Privacy Act 2014*. The Registrar-General provides identifiable information to law enforcement and other Directorates that have legal authority to request information under prescribed circumstances.

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.

### INSTRUCTIONS FOR COMPLETION

- A TA is a dutiable document. This document should be assessed by ACT Revenue prior to lodgement with Land Titles.
- Original sealed probate or certified true copy of original must be supplied with lodgement of this form.
- The certificate of title or production of title consenting to the registration of this document is required for lodgement.
- In cases of bankruptcy the Buyer and Seller Verification Declarations must be completed prior to lodgement of this form. In the case of a deceased estate only the Buyer Verification Declaration is required. The submission date and reference number must be recorded on this form.
- All information should be typed or clearly printed. If completing this form by hand please use a solid black pen only.
- The first named person in the entitled section of this form will be the primary contact for ACT Revenue Office purposes.
- 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).

### LODGEMENT AND CONTACT INFORMATION

Website:  
[accesscanberra@act.gov.au](mailto:accesscanberra@act.gov.au)

**General Enquiries:**  
(02) 6207 3000

**In Person:**  
Environment, Planning and Land Shopfront  
Ground Floor South, Dame Pattie Menzies House, 16 Challis Street, Dickson  
Opening hours - Monday to Friday 8:30am to 4:30pm (*excluding public holidays*)



ACT Revenue Notation

LAND TITLES  
ACCESS CANBERRA  
Chief Minister, Treasury and  
Economic Development Directorate**TRANSMISSION APPLICATION**

Form 032 - TA

*Land Titles Act 1925***LODGING PARTY DETAILS**

Name	Email Address	Contact Telephone Number

**TITLE AND LAND DETAILS**

Volume & Folio	District/Division	Section	Block	Unit

**THE SELLER VERIFICATION STATEMENT HAS BEEN SUBMITTED** (In cases of bankruptcy only) to be completed prior to lodgement of this document) Yes – (provide date and reference number, if there are multiple submissions provide details for all)  
Submission Date: Reference Code:**FULL NAME OF DECEASED / BANKRUPT** (Surname Last)**ESTATE OR INTEREST TRANSFERRED** (whole or state share)**DATE OF DEATH** (if applicable)**RESTRICTIVE COVENANTS**

(Complete if applicable otherwise state below "Not Applicable")

**REPRESENTING SOLICITOR DETAILS** (Complete if applicable – otherwise state below "Not Applicable")

Name of Firm	Solicitor Email Address	Solicitor Name

**THE BUYER VERIFICATION STATEMENT HAS BEEN SUBMITTED** (must be completed prior to lodgement of this document) Yes – (provide date and reference number, if there are multiple submissions provide details for all)  
Submission Date: Reference Code:**FULL NAME OF APPLICANT** (Surname Last)**FULL POSTAL ADDRESS** including post code (after transmission)

**FORM OF TENANCY** (only complete if applying as beneficiaries)

- Joint Tenants  
 Tenants in Common in Equal Shares  
 Tenants in Common in the following shares (Please state proprietors name and shares out in full) -

**ENTITLEMENT** (delete whichever is not applicable)

**Entitled as** - Executor / Beneficiary / Administrator /Other (Please State) -

**SUPPORTING DOCUMENTATION** (delete whichever is not applicable)

Pursuant to:  Probate  Letters of Administration  Sequestration Order  Other – Please specify

Number

Granted on (date)

Granted to:

**ARE YOU APPLYING FOR A CONCESSION?**

- Yes (if yes provide code number) Code Number:  
 No

**PLEASE INDICATE IF THIS TRANSACTION INVOLVES ONE OR BOTH OF THE FOLLOWING:**

- A Land Rent lease  
 An Application for a Duty Deferral

**DEVELOPMENT STATUS** (Tick the appropriate box – one box must be completed)

Land Only                      **or**                       Incomplete Building                      **or**                       Building Completed

**LAND USE** (Tick the appropriate box – one box must be completed)

Residential                      **or**                       Commercial                      **or**                       Rural

**ACTPLA – MINISTER’S / DELEGATE’S CONSENT****EXECUTOR/S CONSENT** (if applicable)

Print full name of Executor/s

Print full name and address of witness

Signature of Executor/s

Signature of witness

Dated -

Dated -

<b>APPLICANT'S EXECUTION</b>	
Print full name of applicant	Print full name and address of witness
Signature or common seal of applicant	Signature of witness
Dated -	Dated -

<b>OFFICE USE ONLY</b>			
Lodged by		Certificate of title lodged	
Data entered by		Certificates attached to title	
Registered by		Attachments/Probate/Will Letters of Administration	
Registration date		Production number	