

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. You may also obtain further information and forms at www.act.gov.au/accesscbr.

PRIVACY NOTICE

The collection of personal information in this form is required by law under the *Land Titles Act 1925*, to ensure accurate and legal transfer of title or registration of other interests relating to land and for maintaining publicly searchable registers and indexes. Personal information collected on this form will be handled in accordance with the Territory Privacy Principles in Schedule 1 of the Information Privacy Act 2014. More detailed information about how Access Canberra handles this personal information is available at: <https://www.act.gov.au/acprivacy>

INSTRUCTIONS FOR COMPLETION

- A Transmission Application is a dutiable document.
- 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.
- The Buyer and Seller Verification Declarations (in cases of bankruptcy) must be completed prior to lodgement of this form. The submission date and reference number must be recorded on this form.
- Please indicate if the property is a Crown lease granted under the Land Rent Scheme. Duty for a land rent transaction is calculated in the same way as other Crown leases.
- If a duty concession/exemption is being claimed or the transferee is applying for Deferred Duty, please record the applicable code number. The codes and required documentation to retain are available on www.revenue.act.gov.au.
- 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.
- 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 must state sole director. (This execution does not require a witness).

LODGE MENT AND CONTACT INFORMATION

Website:

www.accesscanberra.act.gov.au

General Enquiries:

13 22 81

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*)



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LODGING PARTY DETAILS			
Name	Email Address	Customer Reference Number	Contact Telephone Number

TITLE AND LAND DETAILS				
Volume & Folio	District/Division	Section	Block	Unit

THE SELLER VERIFICATION DECLARATION 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)	DATE OF DEATH (if applicable)

PERCENTAGE OF INTEREST OWNED (whole or state share)	PERCENTAGE OF INTEREST BEING TRANSFERRED (whole or state share)

FULL NAME OF APPLICANT (Surname Last)	THE BUYER VERIFICATION DECLARATION HAS BEEN SUBMITTED (must be completed prior to lodgement of this document)
	Provide date and reference number/s Submission Date: _____ Reference Code: _____

ENTITLEMENT (delete whichever is not applicable)

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

FORM OF TENANCY (only complete if applying as beneficiaries)

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

SUPPORTING DOCUMENTATION (delete whichever is not applicable)			
Pursuant to: <input type="checkbox"/> Probate <input type="checkbox"/> Letters of Administration <input type="checkbox"/> Sequestration Order <input type="checkbox"/> Other – Please specify			
Number	Granted on (date)	Granted to:	
DEVELOPMENT STATUS (Tick the appropriate box – one box must be completed)		LAND USE (Tick the appropriate box – one box must be completed)	
<input type="checkbox"/> Land Only	<input type="checkbox"/> Incomplete Building	<input type="checkbox"/> Residential	<input type="checkbox"/> Rural
<input type="checkbox"/> Building Completed		<input type="checkbox"/> Commercial	
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	
APPLICANT'S EXECUTION			
Print full name of applicant		Print full name and address of witness	
Signature or common seal of applicant		Signature of witness	
OFFICE USE ONLY			
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	