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| ACT Government logo and Access Canberra logo | LAND TITLESACCESS CANBERRA Chief Minister, Treasury and Economic Development Directorate  **WITHDRAWAL OF CAVEAT** |
| |  | | --- | | **Form 037 - WX** | | ***Land Titles Act 1925*** |

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| IMPORTANT INFORMATION  This form is to be used to lodge a withdrawal of caveat 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 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   * The certificate of title is not 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. * If the caveator’s solicitor withdrawing the caveat is not the same as the solicitor who lodged the original caveat, evidence of authority to act from the caveator must be produced with this form. * Execution by:  1. **A Natural Person** – Should be witnessed by an adult person who is not a party to the document. 2. **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). 3. **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:    * 1. Two directors of the company;      2. A director and a secretary of the company; or      3. 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). |
| |  |  | | --- | --- | | LODGEMENT AND CONTACT INFORMATION | | | **Website:**  [www.accesscanberra.act.gov.au](http://www.accesscanberra.act.gov.au)  **Email:**  [actlandtitles@act.gov.au](mailto:actlandtitles@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)* | |

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| **LODGING PARTY DETAILS** | | | | | |
| Name | Email Address | | | Customer Reference Number | Contact Telephone Number |
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| **TITLE AND LAND DETAILS** | | | | |
| Volume & Folio | District/Division | Section | Block | Unit |
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| **REGISTERED CAVEAT NUMBER BEING WITHDRAWN** | **DATE CAVEAT WITHDRAWAL IS EFFECTIVE** |
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| **FULL NAME OF CAVEATOR/S** (Surname Last) (ACN required for all companies) |
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| **REPRESENTING SOLICITOR DETAILS FOR CAVEATOR** (Complete if applicable – otherwise state below “Not Applicable”) | | |
| Name of Firm | Solicitor Email Address | Solicitor Name |
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| **FULL NAME OF REGISTERED PROPRIETOR/S** (Surname Last) (ACN required for all companies) |
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| **CAVEATOR/S – EXECUTION** | |
| Print full name of Caveator/Caveator’s Solicitor    Signature of applicant | Print full name and address of witness    Signature of witness |

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| **OFFICE USE ONLY** | | | |
| Lodged by |  | Certificate of title lodged |  |
| Data entered by |  | Certificates attached to title |  |
| Registered by/Registered on |  | Attachments / Annexures |  |