

Notice of Disposition of an Interest in Land

Common form to be completed by VENDORS-USE BLOCK LETTERS

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A copy of this form is to be forwarded (where applicable) to:

Commissioner of Land Tax, 436 Lonsdale Street, Melbourne 3000: Melbourne Water, Box 4342, P.O. Melbourne 3001: State Rivers and Water Supply Commission, 590 Orrong Road, Armadale, 3143, or Branch Office: Municipality-Forward to the Municipal Office in which property is situated: Local Sewage, Water and River Improvement Authority

FOR OFFICE USE ONLY	Reference No.		DATE	Rate % Ten	Reg. Rate or Agents List			W.B. M Resp	Rate	
	RIX	56				No.	Cod e		Hold	A/C
	1	3		13	Add	82	87		Add	
	Water Utility Reference Number				75	Delete	88	93	94	95

PARTIES TO THE TRANSACTION

VENDOR/TRANSFEROR Surname	57	PURCHASER/TRANSFEEE Surname
Other Names (in full)		Other Names (in full)
Occupation		Occupation
Address	59	Address
Rent or Lease (if known)\$	60	If purchaser will not State Name of Occupier (if known)
Address for Service of Future Notices (if known)	62	Address for Service of Future Notices (if known)

DETAILS OF TITLE AND TRANSACTION

Area or Dimensions	Flat/Unit No.	Street No	Street, Road, etc.	Town or Suburb	Postcode
Side of Street Distance & Direction from and Name of nearest Side Street (where applicable)	Allotment		Section or Portion	Parish	
	19	Lot No	25	Plan No.	Volume Folio
Municipality	Ward or Riding	For office u e	Date of Transfer Contract	Date Possession Given	
Total Sale Price \$	Less Chattels, etc \$ (as detailed below)		Net Sale Price \$		
Terms of Sale <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Terms extending over	Deposit \$		Balance		
	Deposit \$		Balance by instalments of \$ per		
	years with interest at	per cent	Balance due		

PROPERTY DETAILS

Are there any improvements to the property?	Are there any items in the transaction additional to the land and improvements? If so, show approximate value	\$	\$	Plant and Machinery Licence Chattels, Crops, Livestock, etc.
Was the purchaser, at the time of this transaction, in respect of this property, one (or more) of the following:				
Occupier <input type="checkbox"/>		Lessee <input type="checkbox"/>		
Construction of Main Structure (if applicable) Brick <input type="checkbox"/> Veneer <input type="checkbox"/> Timber <input type="checkbox"/> Fibro <input type="checkbox"/> Cement <input type="checkbox"/> Other <input type="checkbox"/>			Description of property Code Numbers <input type="text"/> <input type="text"/> <input type="text"/>	
Name and Address of Solicitor or Agent for Vendor Telephone		Name and Address of Solicitor or Agent for Purchaser Telephone		
I/We hereby declare that the above statements are true and correct				
Witness _____ Date _____		_____ Signature of Vendor or Solicitor for Vendor This form was lodged by		