

REQUEST TO AMALGAMATE

Dealing Number

Lodger (Name, address & phone number)

Lodger
Code



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1. Lot on Plan Description of land held **Title Reference**

2. Applicant

3. How land/shares in item 1 is held

4. Instrument by which land to be amalgamated was acquired

Dealing Type Dated

Dealing No. Share acquired

5. Lot on Plan Description of land acquired **Title Reference**

6. Amalgamated Lot on Plan description **Title Reference
(if amalgamation of shares)**

7. Request/Execution by applicant

It is requested that

Witnessing officer must be aware of his/her obligations under section 162 of the Land Title Act 1994

..... signature

..... full name

..... qualification

Witnessing Officer

(Witnessing officer must be in accordance with Schedule 1 of Land Title Act 1994 eg Legal Practitioner, JP, C Dec)

/ /
Execution Date

.....
Applicant's or Solicitor's Signature

Note: A Solicitor is required to print full name if signing on behalf of the Applicant