

ORDER FORM

TO: First Title

FAX TO: (02) 9299 3388

EMAIL TO: homeownersorders@firsttitle.com.au

ORDERING PARTY CONTACT DETAILS		
Firm/Company Name:		Matter/File Ref:
Contact Name:		
Email Address:		
Postal Address:		
Phone No:		Fax No:

PURCHASE DETAILS		
Purchase Price: (less any cash backs or incentives)	\$	Anticipated Settlement Date:
Nature of Property:	<input type="checkbox"/> Residential <input type="checkbox"/> Rural	If rural: area of property <input type="checkbox"/> ≤ 50 acres <input type="checkbox"/> > 50 acres
Full Name of Each Purchaser: (include ACN and Trust Name if applicable)		
Email address/Postal address: (Should you wish for First Title to send policy to client direct)		

PROPERTY DETAILS	
Address: (Street Address, Suburb, State, Postcode)	
Certificate of Title: (Title reference)	
Legal Description: (lot number, plan type, plan number)	

REPORT ON TITLE	Yes	No
Please indicate whether you wish to receive a 'Report on Title Fee'	<input type="checkbox"/> *	<input type="checkbox"/>
*The Report on Title Fee is payable subject to the terms and conditions of your firm's Authorisation as a Distributor		
An up-to-date title search has been reviewed and any adverse notation/affectation will be removed on or before settlement, and a final title search will be reviewed prior to settlement	<input type="checkbox"/>	
The following searches have been carried out: council rates; water rates; land tax; strata / body corporate (if applicable) and mine subsidence (if applicable) ** If 'No', then you confirm the relevant searches will be carried out prior to settlement	<input type="checkbox"/>	<input type="checkbox"/> **
Known Risks: Has the vendor disclosed, is the purchaser aware of, or do the results of any property enquiries show any actual or potential defects in title? (If in doubt - disclose. They may be able to be insured over.) *** If 'yes', please attach details and copies of any relevant documentation [eg. title search, details of defect, survey report, special conditions of Contract, building plans/reports]	<input type="checkbox"/> ***	<input type="checkbox"/>
Each purchaser has : <ul style="list-style-type: none"> ▪ been advised of their duty of disclosure under the Insurance Contracts Act 1984 ▪ consented to the release of their personal information to First Title ▪ consented to First Title auditing the Conveyancing Adviser's file in the event of claim being made under the Policy 	<input type="checkbox"/>	

I declare that the information contained in this form is accurate, to the best of my knowledge. I confirm that I will immediately notify **First Title** of any known risks, or changes to the above information, that I am made aware of prior to settlement following ordering the Policy.

Solicitor/Conveyancer Name	Solicitor/Conveyancer Signature	Date

First Title complies with the National Privacy Principles in protecting the privacy of personal information. Please visit www.firsttitle.com.au or call **First Title** on 1300 362 178 for a copy of its Privacy Statement.