

NOTICE OF INTENDED SALE (Shared Equity Purchase)

PERSONAL DETAILS

Surname - Applicant 1	Given Names		
Surname - Applicant 2	Given Names		
Address - Applicant 1	Phone (H)	Phone (W)	
Address - Applicant 2	Phone (H)	Phone (W)	
Property:			

REASONS FOR SALE

Moving interstate/overseas?	<input type="checkbox"/>
Moving within Australian Capital Territory?	<input type="checkbox"/>
Upgrading Home (eg: can now afford to buy/or need a bigger home)?	<input type="checkbox"/>
Financial reasons (eg; cannot afford loan repayments)?	<input type="checkbox"/>
Other: _____ (Please specify)	<input type="checkbox"/>

ACKNOWLEDGEMENTS

Upon receipt of this Notice the Commissioner will arrange an Independent Valuation in accordance with your Equity Loan Agreement and will notify you of whether the Commissioner wishes to buy the Property from you for an amount that equals the Value of the Property; and the amount of the Commissioner's Equity Share.

I/We acknowledge that I/We are bound by the Equity Loan Agreement and the Mortgage; and that the Mortgage over the property will only be discharged in accordance with the Equity Loan Agreement and Mortgage.

I/We acknowledge that I/We have read and understood the above information and confirm that the details I/We have provided in this Notice are true in every particular.

Signed by Applicant 1:	Signed by Applicant 2:
Date:	Date:

DELIVERY OF THIS NOTICE

The completed form can be delivered to Housing ACT as below;

BELCONNEN

Applicant Services Centre
Nature Conservation
House
Cnr Emu Bank & Benjamin
Way

CANBERRA CITY

City Health Centre
1 Moore Street

DROP OFF BOX
ONLY

WODEN

Phillip Health Centre
Cnr Corinna & Keltie Sts

DROP OFF BOX ONLY

TUGGERANONG

Canberra Connect
Shop 17-21
Homeworld Reed St
DROP OFF BOX
ONLY

Or mailed to; Housing ACT, Locked Bag 3000, Belconnen ACT 2617 Attention: Shared Equity Scheme