



**INSTRUCTIONS**

1. If insufficient space in any section, Additional Sheet Form B1 should be used with appropriate headings. The boxed sections should only contain the words "See Annexure".
2. Additional Sheets shall be numbered consecutively and bound to this document by staples along the left margin prior to execution by parties.
3. No alteration should be made by erasure. The words rejected should be scored through and those substituted typed or written above them, the alteration being initialled by the person signing this document and their witnesses.

**NOTES**

**1. DESCRIPTION OF LAND**

Lot and Diagram/Plan/Strata/Survey-Strata Plan number or Location name and number to be stated.  
Extent – Whole, part or balance of the land comprised in the Certificate of Title to be stated.  
The Certificate of Title Volume and Folio is to be stated.

**2. MEMORIAL NUMBER**

State registration number of the Memorial being cancelled.

**3. ATTESTATION**

This document is to be executed by the Minister for Lands or, if applicable, a person to whom the power to request cancellation of a Memorial under section 16(5) of the *Land Administration Act 1997* has been duly delegated under section 9(1) of that Act.

Registered pursuant to the provisions of the LAND ADMINISTRATION ACT 1997 as amended and the TRANSFER OF LAND ACT 1893 as amended on the day and time shown above and particulars entered in the Register.

Office Use Only

**CANCELLATION OF MEMORIAL OF CHARGE (WM)**

LODGED BY

ADDRESS

PHONE No.

FAX No.

REFERENCE No.

ISSUING BOX No.

PREPARED BY

ADDRESS

PHONE No.

FAX No.

INSTRUCT IF ANY DOCUMENTS ARE TO ISSUE TO OTHER THAN LODGING PARTY

TITLES, LEASES, DECLARATIONS ETC LODGED HEREWITH

1. \_\_\_\_\_ Received Items
2. \_\_\_\_\_ Nos.
3. \_\_\_\_\_
4. \_\_\_\_\_ Receiving Clerk
5. \_\_\_\_\_
6. \_\_\_\_\_