## **REQUEST TO RECORD DEATH**

FORM 4 Version 5
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Land Title Act 1994, Land Act 1994 and Water Act 2000

Dealing Number

OFFICE USE ONLY

Privacy Statement

Lodger (Name, address, E-mail & phone number)

Lodger Code

Collection of information from this form is authorised by legislation and is used to maintain publicly searchable records. For more information see the Titles Queensland website.

1.	Deceased's name			
2.	Lot on Plan Description			Title Reference
3.	Interest held by deceased			
4.	Applicant Given Names		Surname	
Ad	dress for service of notices to the appl (for rates purposes etc)	licant:		
5.	Document(s) deposited			
	Office copy of Death Certificate issued be evidence from other jurisdictions	by the Registra	ar General of Births, D	eaths & Marriages (Qld) or equivalent
6.	Authority of applicant			
	Request			
	In accordance with the particulars disclo	sed above, it	is requested that this	death be recorded.
	Witnessing officer must be aware o	f his/her obli	gations under section	n 162 of the Land Title Act 1994
		signature		
		full name		
		qualification	1 1	
Witnessing Officer			<b>Execution Date</b>	Applicant's or Solicitor's Signature
(Witnessing officer must be in accordance with Schedule 1 of Land Title Act 1994 eg Legal Practitioner, JP, C Dec)			Note: A Solicitor is required to print full name if signing on behalf of the Applicant and no witness is required in this instance	