



NORTH CAROLINA REAL ESTATE COMMISSION
 P.O. Box 17100 Raleigh, N.C. 27619-7100
 Phone (919) 875-3700 • Email: ra@ncrec.gov
 Website: www.ncrec.gov

AFFIDAVIT OF TIMESHARE PROGRAM BROKER

I, the undersigned, being first duly sworn, affirm chat:

1. I hereby accept the appointment as of the date shown below as Timeshare Program Broker for the registered timeshare named below; and
2. I have read and fully understand the provisions of the North Carolina Real Estate License Law (G.S. 93A), the North Carolina Timeshare Act and the Rules and Regulations of the North Carolina real Estate Commission; and
3. I acknowledge my duty and responsibility to act as a supervising broker for all brokers at the timeshare program named below and to actively, personally and directly supervise all licensed real estate brokers in a manner which will reasonably assure that the sale of timeshares at such program will be conducted in accordance with the law; and
4. I agree to immediately notify the North Carolina Real Commission of the association or termination of association of any real estate brokers at the program named below; and
5. I agree to immediately notify the North Carolina Real Estate Commission upon the termination of my appointment as Timeshare Program Broker for the below-named program.

 Timeshare Program Name

 Timeshare Registration Number

 Program Broker Name

 License Number

 Program Broker Address (Not P.O. Box or Address c/o Program)

 Program Broker Email Address

 Program Broker Telephone Number

 Program Broker Signature

State Of _____

County Of _____

Sworn to and subscribed before me the _____ day of _____, 20 ____.

(NOTARY SEAL)

 Signature of Notary

My Commission expires: _____