



North Carolina Real Estate Commission
 P.O. Box 17100, Raleigh, N.C. 27619-7100
 Phone (919) 875-3700 • E-mail: RA@ncrec.gov
 Website: www.ncrec.gov

**AFFIDAVIT OF INDEPENDENT ESCROW AGENT
 FOR FINANCIAL INSTITUTION**

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

1. I am authorized to represent a financial institution located in North Carolina; and
2. I hereby accept appointment as of the date shown below as Independent Escrow Agent for the registered time share project named below; and
3. I have read and fully understand the provisions of the North Carolina Time Share Act (Article 4, G.S. 93A) which sets forth the duties and responsibilities of Independent Escrow Agent; and
4. I will, in furtherance of the responsibilities as Independent Escrow Agent, deposit and maintain in a trust or escrow account in an insured bank or savings and loan association located in this State all payments made by purchasers on account of time shares purchased at the project named below, and shall return such payments to the purchasers after 120 days following the purchasers' execution of their time share purchase contracts unless, prior to that time, a lien-free or lien-subordinated time share instrument to such time share has been recorded; and
5. I acknowledge the responsibility to make available to the North Carolina Real Estate Commission or its representatives all records relating to monies held in the capacity as Independent Escrow Agent; and
6. I agree to immediately notify the North Carolina Real Estate Commission upon the termination of the appointment as Independent Escrow Agent for the below-named project.

Time Share Project Name	Time Share Registration Number
<p>_____</p> <p style="text-align: center;">Name of the Financial Institution</p> <p>_____</p> <p style="text-align: center;">Address of Financial Institution</p>	
<p>By: _____</p> <p style="text-align: center; font-size: small;">Name and Title (President or Vice President) of person executing affidavit</p>	<p>_____</p> <p style="text-align: center; font-size: small;">Signature of person executing affidavit</p>
<p>Attest: _____</p> <p style="text-align: center; font-size: small;">Name and Title (Secretary or Assistant Secretary) of person attesting to execution of affidavit</p>	<p>_____</p> <p style="text-align: center; font-size: small;">Signature of person attesting to affidavit</p>

STATE OF _____
 COUNTY OF _____

I, _____ a Notary Public for said County and State certify that
 _____ personally came before me this day and acknowledged
 that he/she is _____ of _____ and
 acknowledged on behalf of _____, the due execution of the foregoing
 instrument.

Witness my hand and official seal, this the _____ day of _____, 20_____.

[NOTARY SEAL]

 Signature of Notary Public

My Commission expires: _____



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**AFFIDAVIT OF INDEPENDENT ESCROW AGENT
 FOR ATTORNEY**

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

1. I am an Attorney-at-Law licensed to practice in North Carolina; and
2. I hereby accept appointment as of the date shown below as Independent Escrow Agent for the registered time share project named below; and
3. I have read and fully understand the provisions of the North Carolina Time Share Act (Article 4, G.S. 93A) which sets forth the duties and responsibilities of Independent Escrow Agent; and
4. I will, in furtherance of the responsibilities as Independent Escrow Agent, deposit and maintain in a trust or escrow account in an insured bank or savings and loan association located in this State all payments made by purchasers on account of time shares purchased at the project named below, and shall return such payments to the purchasers after 120 days following the purchasers' execution of their time share purchase contracts unless, prior to that time, a lien-free or lien-subordinated time share instrument to such time share has been recorded; and
5. I acknowledge the responsibility to make available to the North Carolina Real Estate Commission or its representatives all records relating to monies held in the capacity as Independent Escrow Agent; and
6. I agree to immediately notify the North Carolina Real Estate Commission upon the termination of the appointment as Independent Escrow Agent for the below-named project.

Time Share Project Name	Time Share Registration Number
Attorney's Name	Attorney's Signature
Attorney's Address	Date

STATE OF _____

COUNTY OF _____

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

(NOTARY SEAL)

Signature of Notary

My Commission expires: _____