

Order ID: _____

APPLICATION FOR RENEWAL OF TIMESHARE PROGRAM REGISTRATION

Instructions

• It is unlawful to sell timeshares when the Certificate of Registration has expired.

- If you have not notified the Commission of changes made in any registration documents, do so now following the procedures set forth in 21 NCAC 58B .0104.
- Application For Renewal of Timeshare Program Registration is due by June 30th each year.
- This form is to be completed by either the Developer, Developer's Attorney or the Program Broker.
- \$800 non-refundable Annual Renewal Application Fee for Developer from May 15th June 30th.
- \$450 non-refundable Annual Renewal Application Fee for Homeowner's Association from May 15th June 30th.
- Assessed \$50 non-refundable fee plus renewal cost if received after June 30th.
- Payment may be made online with a Visa, MasterCard, American Express, Discover, or valid PayPal account. A renewal or reinstatement application that is mailed to the Commission must be accompanied by a certified bank check only. **All fees are non-refundable.**

Type of Application \Box Renew	wal 🗌 Reinstatement				
Type of Organization \Box Devel	loper 🛛 Association				
Program Name	Registration No				
Program Mailing Address	(Street Address)	(City)	(State)	(Zip)	
Developer Name					
Developer Address	(Street Address)	(City)	(State)	(Zip)	
Developer's Phone	Developer's E-mail Address)			
	Records				
	re program registration, you <u>must</u> compl on blank will result in return of form):	ete the applicable portions o	f this Section (marking "No	
to their acceptance of the	pendent escrow agent and program broker mu se positions and an affidavit of notifying chan ces/Forms or upon request to the Commission	ge signed by the Developer. Th			
1. Managing Entity Name					
Address	(Street Address)	(City)	(State)	(Zip)	
Phone	E-mail Address				
2. Marketing Entity Name		License No			
Address	(Street Address)	(City)	(State)	(Zip)	
Phone	E-mail Address				

3.	Registrar Name (See G	S.S. 93A-58(a))				
	Address	<i>2</i>		(0)	(7.)	
		(Street Address)	(City)	(State)	(Zip)	
	Phone	E-mail Address				
4.	Independent Escrow	Agent Name (See G.S. 93A-42(a))				
	Address	(Street Address)				
			(City)	(State)	(Zip)	
	Phone	E-mail Address				
5.	Program Broker Nam	e (See G.S. 93A-58(c))	License No			
	Address	(Street Address)	(City)	(State)	(Zip)	
	Phone	E-mail Address				
		Brokers Associated with	Program			
N	OTE: This notification	does not relieve the individuals listed below f	e	s in their e	mplovment	
		nmission. To report additional brokers atta				
1.	Name		License No.			
2.	Name		License No.			
3.	Name		License No.			
4.	Name		License No.			
5.	Name		License No.			
6.	Name		License No.			
7.	Name		License No.			
8.	Name		License No.			
9.	Name		License No.			
10	. Name		License No.			
11	. Name		License No.			
		Exchange Progra	ms			
N	OTE: Purchasers have	the opportunity to subscribe to the follow	ing exchange program(s)			
1.	Name of Exchange Pr	ogram				
2.	Name of Exchange Pr	ogram				
	i kunte of Exemunge i i	Signature and Certif				
reg		mation contained herein and herewith subm ndment properly filed with the North Caroli	itted are true and that the inform			
Sig	gnature	Date				
Pri	inted Name		eveloper 🗌 Developer's Attorn	ey 🗌 Pro	ogram Broker	

EMPLOYEE MISCLASSIFICATION

As required by the NC state legislature in NCGS § 143-765, effective January 1, 2018, in order to apply for or renew an occupational license, permit, or certification, the applicant must certify that they have read and understand the public notice statement from the Employee Classification Section of the State Industrial Commission and must disclose any investigations for employee misclassification.

Public Notice Statement

required by N.C. Gen. Stat. § 143-764(a)(5), effective December 31,2017

Any worker who is defined as an employee by N.C. Gen. Stat. §§ 95-25.2(4)(NC Department Of Labor), 143-762(a)(3)(Employee Fair Classification Act), 96-1(b)(10)(Employment Security Act), 97-2(2)(Workers' Compensation Act), or 105-163.1(4) (Withholding; Estimated Income Tax for Individuals) shall be treated as an employee unless the individual is an independent contractor. Any employee who believes that the employee has been misclassified as an independent contractor by the employee's employer may report the suspected misclassification to the Employee Classification Section within the North Carolina Industrial Commission.

Employee Classification Section North Carolina Industrial Commission 1233 Mail Service Center Raleigh, NC 27699-1233 Telephone: (919) 807-2582 Fax: (919)715-0282 Email: emp.classification@ic.nc.gov

Employee misclassification is **defined** as avoiding tax liabilities and other obligations imposed by Chapter 95, 96, 97, 105, or 143 of the North Carolina General Statutes by misclassifying an employee as an independent contractor. [*N.C. Gen. Stat.* § 143-762(5)]

☐ I certify that I have read and understand the Public Notice Statement.

Since your last registration renewal [or since the date of initial registration if this is your first renewal], have you been the subject of an investigation for employment misclassification by a government entity?

🗌 Yes 📙 No

If YES, please provide the investigating entity, case or file number, if known, and the results of the investigation.