



# Title Co. (Regular) Membership Application Agency

Please complete and return with payment to:

NCLTA, 3739 National Drive, Suite 202, Raleigh, NC 27612

Phone: (919) 861-5584

Fax: (919) 787-4916

List information as it should appear in the electronic *Membership Directory*.

(Directory information will be submitted to the American Land Title Association, NC Department of Insurance, and appear on the NCLTA web site, [www.nclta.org](http://www.nclta.org).)

**TITLE INSURANCE AGENCY MEMBERS:** Corporations duly licensed by the State of North Carolina as Agents to issue assurances insuring North Carolina real estate titles in accordance with the laws of the State of North Carolina as an agent for a title insurer that is duly licensed by the State of North Carolina to insure North Carolina real estate titles. However, if a title insurer and any agent of said title insurer are managed or effectively controlled by the same persons or share any common officer, only the title insurer will be eligible for regular membership in the Association.

Branch Name \_\_\_\_\_ License # \_\_\_\_\_  NCDOL  NC State Bar

Manager's Name \_\_\_\_\_ First Date of Operation \_\_\_\_\_

Street Address \_\_\_\_\_

Zip Code (if different from mailing address) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Toll-Free (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Toll-Free Fax (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_ URL \_\_\_\_\_

—List Branches and Additional Personnel on Next Page—

*Payment of organization dues is generally deductible as an ordinary and necessary business expense. Contributions or gifts are generally not deductible as charitable contributions for federal income tax purposes.*

### DUES SCHEDULE:

Annual dues of \$1500 (or \$500 for **first** year of operation or \$600 for **second** year of operation) per title agency (incl. one primary contact), **plus**

Branches (No. \_\_\_\_\_ North Carolina branches). Annual dues of \$110 per branch.

Please list names of representatives and addresses on next page

Directory and Mailing Listings for Additional Staff members at the same address as Agent and Branch Members. Annual dues \$50. (No. \_\_\_\_\_ Additional Personnel). Please list names of employees on next page.

Agency dues \$1500/\$500/\$600 + (# \_\_\_\_\_ Branches @ \$110 = \$ \_\_\_\_\_) + (# \_\_\_\_\_ Directory Listings @ \$50 = \$ \_\_\_\_\_) + Special Assessment (\$250)\* = \$ \_\_\_\_\_

\*Special government relations/lobbying assessment waived for first year of membership.

**Total amount enclosed: \$ \_\_\_\_\_** (made payable to "NCLTA")

Enclose documentation of NCDOL licensing of both title agency and title agent (or attorney bar #).

We agree to abide by:  the NCLTA Bylaws  the ALTA "Principles of Fair Conduct"

Signature \_\_\_\_\_

Name(s) of Title Insurer(s), licensed in NC, for which you are appointed an Agent with NCDOL:

(This page may be photocopied if additional listings are required.)

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Additional Main Office Staff (@\$50 ea.):

\_\_\_\_\_ Email \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

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Branch Name \_\_\_\_\_

Branch Manager's Name (@ \$110) \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

Additional Staff (@\$50 ea.):  
\_\_\_\_\_ Email \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_

Zip Code (if different from mailing address) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Toll-Free (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Toll-Free Fax (\_\_\_\_\_) \_\_\_\_\_

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Branch Name \_\_\_\_\_

Branch Manager's Name (@ \$110) \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

Additional Staff (@\$50 ea.):  
\_\_\_\_\_ Email \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_

Zip Code (if different from mailing address) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Toll-Free (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Toll-Free Fax (\_\_\_\_\_) \_\_\_\_\_

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Branch Name \_\_\_\_\_

Branch Manager's Name (@ \$110) \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

Additional Staff (@\$50 ea.):  
\_\_\_\_\_ Email \_\_\_\_\_  
\_\_\_\_\_ Email \_\_\_\_\_

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Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Toll-Free (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Toll-Free Fax (\_\_\_\_\_) \_\_\_\_\_