

**AFFIDAVIT OF SATISFACTION
OF SECURITY INSTRUMENT BY
ATTORNEY LICENSED TO PRACTICE LAW IN NORTH CAROLINA
[N.C.G.S. 45-36.16 and 45-37(a)(7)]**

DATE OF AFFIDAVIT: _____

The undersigned hereby states as follows:

1. I am an attorney licensed to practice law in the State of North Carolina.
2. I am signing this Affidavit of Satisfaction to evidence full payment or performance of the obligations secured by real property covered by the following security instrument (the "Security Instrument") currently held by _____ (the "Secured Creditor"):

Type of security instrument: _____
[Identify type of security instrument, such as deed of trust or mortgage]

Original Grantor(s): _____
[Identify original grantor(s), trustor(s), or mortgagor(s)]

Original Secured Party(ies): _____
[Identify the original beneficiary(ies), mortgagee(s), or secured party(ies) in the Security Instrument]

County and state of recording: _____

Recording data for Security Instrument: Book _____ at Page _____
or as document number _____.

3. I have reasonable grounds to believe that the Secured Creditor has received full payment or performance of the balance of the obligations secured by the security instrument.
4. With the authorization of the owner of the real property described in the Security Instrument, I gave notification to the Secured Creditor by method authorized by G.S. 45-36.5 that provides proof of receipt that I would sign and record an affidavit of satisfaction of the Security Instrument if, within 30 days after the effective date of the notification, the Secured Creditor did not submit a satisfaction of the security interest for recording or give notification that the secured obligation remains unsatisfied.

5. Check appropriate box:

- The 30-day period identified in paragraph 4 has elapsed, I have no knowledge that the Secured Creditor has submitted a satisfaction for recording, and I have not received notification that the secured obligation remains unsatisfied.

- The Secured Creditor responded to the notification in paragraph 4 by authorizing me to execute and record this Affidavit of Satisfaction.

Print or Type Name: _____
Satisfaction Agent – North Carolina Licensed Attorney

State of _____
County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____

_____ personally came before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed.

Witness my hand and official stamp or seal this _____ day of _____, 20____.

My Commission Expires:

Notary Public
