# CHICAGO TITLE INSURANCE COMPANY

# COMMERCIAL REAL ESTATE BROKER’S LIEN WAIVER (NORTH CAROLINA)

TO:

 (Purchaser/Lessee/Optionee, herein “**Purchaser**”)

(Seller/Lessor/Optionor, herein “**Seller**”)

FROM: (**Broker**)

REGARDING:

 **Transaction**: Conveyance of **Land** described as

 , North Carolina, pursuant to

 Contract, Lease, Option dated by and between Purchaser and Seller

DATE:

1. Broker hereby acknowledges receipt of the sum of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ representing the entire balance due to Broker for all broker’s services rendered by Broker relating to the Transaction under the written commission agreement entered into between the parties pursuant to Chapter 44A, Article 2, Part 4 of the North Carolina General Statutes, and represents that the monies received are the full amount of the commission due and owing pursuant to the agreement.
2. As of the date of execution of this Waiver, the Broker is not and will not be owed future commissions under the agreement or any other written agreement which may affect the Land.
3. Broker hereby waives any claim or lien which Broker may have against Purchaser, Seller, or the Land by reason of this Transaction. Broker shall and does hereby indemnify and hold harmless Purchaser, Seller, and/or any future owner, their successors and assigns, from and against any such claim or lien which may be asserted by any agent, broker or other intermediary by reason of any act or agreement of Broker in this Transaction.
4. To the knowledge of Broker, no other brokers have provided broker’s services as defined in the above statute regarding this Transaction or the Land, other than: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. (If left blank, indicates none known to Broker.)
5. The undersigned individual hereby warrants that the undersigned has personal knowledge of the matters herein stated and is authorized and fully qualified to execute this instrument as or on behalf of Broker.

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| **EXECUTION BY BROKER** |
|  (SEAL)By: Printed or Typed Name/Title: By: Printed or Typed Name/Title:  | State of County of Signed and sworn to (or affirmed) before me this day by  [insert name(s) of principal(s)].Date:  , Notary PublicMy Commission Expires:  |  (Affix Official/Notarial Seal) |