



MASTER TITLE AGENCY, LLC, 8220 UNIVERSITY EXECUTIVE PARK DR., SUITE 180, CHARLOTTE, NC 28262
Phone: (704) 348-2866, E-Fax: (704) 414-2980, Email: Team@MasterTitleAgency.com

FINAL TITLE OPINION

Supplementing Binder No. _____ Supplementing the Preliminary Opinion on Title of the undersigned, we have updated our examination to _____, 20____, at _____ .m.

The following **Exceptions** are eliminated and/or the following **Requirements** have been met:

- All Requirements Satisfied; or
- All Requirements Met Except Deed of Trust in Book _____ at Page _____ paid in full but not yet cancelled of record
- Taxes Paid Through and Including the Year _____
- Other: _____

Property Address: _____

TRANSACTION RECORDING INFORMATION (or, in the alternative, copies of documents attached including recording information):

WARRANTY DEED, in consideration of \$ _____, from
Grantor: _____ (Marital Status as shown on Deed, if applicable _____); TO:
Grantee: _____ (Marital Status as shown on Deed, if applicable _____);
 Dated _____, 20____, filed for record _____, 20____,
 At _____ o'clock ____ M., and recorded in Book _____, Page _____, in the records of _____ County, North Carolina.

DEED OF TRUST, in the principal amount of \$ _____,
 From: **Grantor:** _____ (Marital Status as shown on Deed of Trust, if applicable _____)
 To: **TRUSTEE:** _____
 For: **Beneficiary:** _____
 Dated _____, 20____, filed for record _____, 20____,
 At _____ o'clock ____ M., and recorded in Book _____, Page _____, in the records of _____ County, North Carolina.

ASSIGNED BY _____, To _____, and recorded in Book _____, Page _____, in the records aforesaid. Such assignment or endorsement is, based on the face of the instrument and assuming a valid transfer or negotiation of the indebtedness, sufficient in such state to transfer the benefits of the lien.

Remarks / Second Deed of Trust Information: _____

By: _____

Phone: _____
Fax: _____

The following Standard ALTA Endorsements are requested: _____

Send Owner's Policy To: _____

Send Lender's Policy To: _____

NOTE: THIS FORM CONTAINS REVISION WHICH ARE DIFFERENT FROM THE PROVISIONS OF THE OFFICIAL FORM PROMULGATED BY THE NORTH CAROLINA BAR ASSOCIATION AND SHOULD BE CAREFULLY REVIEWED PRIOR TO EXECUTION.