

CONSTRUCTION BUSINESS REGISTRY (CBR)

This form will add, remove or update information on the CBR ONLY. To update your licensing record, please contact the Division for instructions specific to your license. certification, or registration type.

FACILITY LICENSEE INFORMATION FORM

Please indicate License/Registration type:		
Burglar Alarm Comparison	iny 🛛 Contractor	Handyman
License/Registration Number:		
Business Legal Name:		
Note: If you are a Sole Proprietor, this is your full legal name.		tor, this is your full legal name.
DBA (<i>if applicable</i>):		

Would you like to provide contact information for your business for the Construction **Business Registry?**

Note: Making your contact information available will allow the public to easily locate you for various business opportunities and purposes. You can opt-in or opt-out of providing contact information and can make updates to contact information for the CBR at any time. https://dopl.utah.gov/construction-business-registry/

□ Yes

If you chose "Yes", please indicate what contact information for your business you would like to provide to the PUBLIC for the CBR:

Note: Non-protected license/registration information will automatically be included on DOPL's online verification website.

□ Phone Number □ Email Address □ Mailing Address

Please ONLY provide below, the information that you want publically available on the **Construction Business Registry:**

Address: _____

City: _____ State: ____ Zip: _____

Phone: (_____) _____ –_____ Email: _____



AFFIDAVIT

I understand if I selected 'Yes' above, I opt-in to provide my contact information to the public for the Construction Business Registry (CBR) at my own risk. I understand if I selected 'No' above, only my non-protected Licensee/Registration information will be made public. I understand that I can opt-in or opt-out of providing my contact information for the CBR at any time, and I can update my contact information at any time. See Utah Code § <u>58-55-702</u>.

I understand that I am responsible to update the Division of any changes relating to my license/certification/registration. See Utah Code § <u>58-1-301.7</u>

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Authorized Signature

Printed Name

Submit in person or via express delivery:

Division of Professional Licensing Heber M Wells Building, 1st Floor Lobby 160 E 300 S Salt Lake City, UT 84111 Submit in via US Postal Service: Division of Professional Licensing PO BOX 146741 Salt Lake City, UT 84114-6741

Title/Position

Date

~ or ~

Submit by email to: constructionprograms@utah.gov

This form is classified as a public record and may be available for inspection by the public, except with regard to the release of information which is sub-classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.