

UTAH DEPARTMENT OF COMMERCE

MARGARET W. BUSSE

Executive Director

Division of Professional Licensing

SPENCER J. COX Governor

DEIDRE M. HENDERSON Lieutenant Governor

Dear Resident:

RE: HOMEOWNER CERTIFICATE OF COMPLIANCE RESIDENCE LIEN RESTRICTION AND LIEN RECOVERY FUND ACT

The **Utah Residence Lien Restriction and Lien Recovery Fund Act**, <u>Utah Code § 38-11</u>, provides that homeowners who meet certain criteria can obtain a Certificate of Compliance, which certifies that the owner is protected from mechanics' liens and related lawsuits.

MARK B, STEINAGEL

Division Director

The sections below are instructions on how to apply for a Certificate:

If you contracted for \$5,000 or *less*: You MUST complete this application for Certificate of Compliance and submit the required supplemental documentation.

If you contract for more than \$5,000: You have the option to apply by completing the other *Affidavit of Compliance* located at <u>dopl.utah.gov/residence-lien-recovery-fund/forms/</u>.

The Residence Lien Recovery Fund staff can answer general questions. However, our staff cannot provide you legal advice about your specific legal circumstances or represent you in legal matters. You may contact the Residence Lien Recovery Fund at (801) 530-6719 or <u>constructionprograms@utah.gov</u>.

Please be aware it is your responsibility to understand the statues and rules that govern the Residence Lien Recovery Fund. The statues, rules and additional information may be found on the Fund's website located at: <u>https://dopl.utah.gov/residence-lien-recovery-fund/</u>

Respectfully,

Aaron Godar Lien Recovery Fund Manager



If you contracted for \$5,000 or less: you MUST complete this application for Certificate of Compliance. If you contracted for more than \$5,000, please complete the other application for Certificate of Compliance available at <u>dopl.utah.gov/residence-lien-recovery-fund/forms/</u>.

Homeowner's Name:						
Address of Property:						
City:	State:	Zip:				
Phone: () – Email:						
Mailing Address:	City		State	Zip		
Tax Parcel Number (found on your annu	al property tax notice):					

Checklist

- □ \$30 non-refundable application fee made payable to "DOPL-LRF"
- □ Original Affidavit of Compliance
- Attach a list of all known subcontractors and suppliers
- □ A copy of **this checklist**
- Certificate of Service proving that you sent a copy of this application and all attachments by certified mail/return receipt requested, to all lien claimants and the party with whom you contracted.

Submit in person or via express delivery:

Division of Professional Licensing Heber M Wells Building 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

For Questions:

Call (801) 530-6719 or (866) 275-3675 (Utah only) or E-mail: <u>constructionprograms@utah.gov</u>

BEFORE THE DIVISION OF PROFESSIONAL LICENSING DEPARTMENT OF COMMERCE, STATE OF UTAH

	IN THE MATTER OF THE APPLICATION FOR A CERTIFICATE OF COMPLIANCE ON THE RESIDENT OF				
-	Homeowners' Name	AFFIDAVIT OF COMPLIANCE			
	City: State: Zip:				
	Tax Parcel Number				
I, _		, being first duly sworn state as follows:			
1.	. The information contained in this application and the supporting documents are true and correct, and I will ensure that any information subsequently submitted in conjunction with this application will meet the same standard.				
2.	I understand that it is my responsibility to read and understand all statues and rules pertaining to my application for Certificate of Compliance.				
3.	entered into an oral or written contract on				
4.					
5.	The residence is a single-family dwelling or dupl units. See <u>Utah Code § 38-11-102(21)</u> .				
6.	6. The residence is occupied by me or my tenant or lessee as a primary or secondary residence and was occupied within 180 days from the date of the completion of the construction on the residence. See <u>Utah Code § 38-11-102(17)</u> .				
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.					
Signature of Affiant: Date:					
Printed Name:					

Homeowner's Name

Homeowner's Address

Homeowner's City, State, & Zip

Homeowner's Telephone Number

BEFORE THE DIVISION OF PROFESSIONAL LICENSING
DEPARTMENT OF COMMERCE, STATE OF UTAH

Homeowner's Name v Original Contractor	CERTIFICATE OF SERVICE To the Original Contractor				
I hereby certify that on the day of	, I served a copy of				
(Date) (Month) (Year) the CERTIFICATE OF COMPLIANCE AFFIDAVIT OF COMPLIANCE APPLICATION and					
AFFIDAVIT OF COMPLIANCE to					
for services provided on property owned by					
by depositing a copy in the U.S. mail, return receipt r					
Contractor:					
Address:					
	ate: Zip:				
DATED this day of (Month)	, '' '.				

Signature

Homeowner's Name

Homeowner's Address

Homeowner's City, State, & Zip

Homeowner's Telephone Number

BEFORE THE DIVISION OF PROFESSIONAL LICENSING DEPARTMENT OF COMMERCE, STATE OF UTAH

Homeowner's Name v Original Contractor	CERTIFICATE OF SERVICE To the Lien Holder			
I hereby certify that on the day of	(Month) (Year) , I served a copy of			
the CERTIFICATE OF COMPLIANCE AFFIDAVI	Γ OF COMPLIANCE APPLICATION and			
AFEIDAVIT OF COMPLIANCE 4-				
AFFIDAVIT OF COMPLIANCE to				
for services provided on property owned by	,			
by depositing a copy in the U.S. mail, return receipt r	equested, postage pre-paid, addressed to:			
Lien Holders:				
Address:				
	ate: Zip:			
DATED this day of(Month)	,			

Signature