

UTAH DEPARTMENT OF COMMERCE Division of Professional Licensing

MARGARET W. BUSSE Executive Director MARK B. STEINAGEL Division Director

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.

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

If you contract for more than \$5,000: You MUST complete this application for Certificate of Compliance and submit the required supplemental documentation.

If you contracted for \$5,000 or *less*: 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 constructionprograms@utah.gov.

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: https://dopl.utah.gov/residence-lien-recovery-fund/

Respectfully,

Aaron Godar

Lien Recovery Fund Manager



CERTIFICATE OF COMPLIANCE APPLICATION CHECKLIST

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

\$30 non-refundable application fee made payable to "DOPL-LRF"
Complete Application. The following must be attached your application:
A copy of your written contract with the general contractor.
Evidence establishing the owner of the residence on the date the contract was
entered (ex: warranty deed, title search, or copy of property tax notice showing you
owned the property at the time contract was signed.)
Evidence your contract was paid in full. (ex: canceled checks, HUD, affidavit)
Evidence establishing the project completion date. (ex: copy of Certificate of
Occupancy, final inspection, or date of work substantially complete/termination)
Copies of liens filed on residence
Evidence your contractor was licensed. (You can verify a license at: dopl.utah.gov)
Certificates 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: constructionprograms@utah.gov



APPLICATION FOR CERTIFICATE OF COMPLIANCE Homeowner's Name: _____ Address of Property: City: _____ State: ____ Zip: ____ Phone: (______) ____ = ____ Email: _____ Mailing address or PO Box City State Zip Mailing Address: Tax Parcel Number (found on your annual property tax notice): **Legal Description and/or Lot Number** (found on the Notice of Lien): **Applicant's Representative** (Attorney or Other, if applicable): Middle Name: Law Firm: _____ Address: City: _____ State: ____ Zip: _____ Phone: (_____) ____ = ____ Email: _____



Original Contractor/Factory Built Housing Retailer/Real Estate Developer:						
Contact Name:						
Company Name:						
Address:						
City:	State:	Zip:				
Phone: ()	Email:					
Original Contractor/Factory Built Housing Retailer/Real Estate Developer's Attorney (if applicable):						
Name: First		Last				
Law Firm:						
Address:						
City:	State:	Zip:				
Phone: ()	Email:					
Mechanics' Lien Holders: Attach a copy of all notice of liens filed on your property. List all companies or individuals who have filed a mechanics' lien on your residence. Company or Individual Name:						
Company or Individual Name:						
Company or Individual Name:						
Company or Individual Name:						
Company or Individual Name:						
Company or Individual Name:						

Note: You are required to send 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. <u>Utah Code § 38-1a-701(6)(e)</u>.



Did you enter into a written contract? Utah Code § 38-11-204(4)(a)

☐ Yes. Attach a copy of the contract to this application ■ No. Please explain: Required documentation of licensure or exemption from licensure: Check which section best describes your situation & attach the supporting documentation: ☐ Contracted with a licensed contractor – Utah Code § 38-11-204(4)(a)(i): Attach evidence vour contractor was licensed ☐ Contracted with an exempt contractor – Utah Code § 38-11-204(4)(a)(i): ► Attach evidence your contractor was exempt from licensure ☐ Contracted with a real estate developer – <u>Utah Code § 38-11-204(4)(a)(ii)</u>: ► Attach evidence the developer had ownership interest in the property. ▶ Attach evidence the developer offered the residence for sale to the public. ► Attach a copy of the contract between the developer and a licensed contractor. Payment in Full: Did you pay your original contractor in full according to the terms of the written contract and any modifications to that contract? – Utah Code § 38-11-204(4)(b): ☐ Yes. Attach documents demonstrating payment (ex: canceled checks, HUD settlement statement) ■ No. Please explain:

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

FOR	HE MATTER OF THE APPLICATION A CERTIFICATE OF COMPLIANCE THE RESIDENT OF				
	Homeowners' Name ATED AT:	AFFIDAVIT OF COMPLIANCE, CERTIFICATION, AND RELEASE OF INFORMATION			
City:	State: Zip: Parcel Number				
	E OF UTAH :ss.				
COUN	TY OF)				
I,	(Name of person completing application)	, being first duly sworn state as follows:			
	I am authorized to sign this affidavit for the lapplication.	and the supporting documents are free from fraud,			
3.	I will ensure that any information subsequently submitted to DOPL in conjunction with this application and/or its supporting documents will meet the same standard set forth above.				
4.	I understand that homeowners and/or their representatives who report false information, withhold information, or present false or misleading documentation pertinent to an application in order to receive a Certificate of Compliance from the Lien Recovery Fund to which they are not entitled will be disqualified from receiving said Certificate and may be subject to both criminal prosecution and civil penalties.				
5.	I understand that this application will be classified as a public record and will be available for inspection by the public except with regard to the release of information which is classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.				
6.	Type of Residence: (check the appropriate by ☐ Detached single family dwelling ☐ Duplex (single building with two separ ☐ More than two living units in building				

7. Date construction of the project was complete: (you must check one box & fill in date)	
☐ Certificate of Occupancy	Date
☐ Final Inspection	Date
☐ No substantial work left to complete	Date
☐ Original contractor was terminated	Date
8. Date the residence was/will be occupied: (you	u must check one box & fill in date)
☐ Do not intend to occupy	Date
☐ Have occupied the residence since	Date
☐ Will occupy the residence on	Date
9. How the residence is/will be used: (check the appropriate box)	
☐ Owner's primary residence	
☐ Owner's secondary residence	
☐ Tenant or Lessee's primary residence	
☐ Tenant or Lessee's secondary residence	
☐ Other (explain)	
I hereby authorize all persons, institutions, governme specifically included in the preceding characterization application, to release to the Division of Professional Recovery Fund Manager, any files, records or inform Division of Professional Licensing to properly evaluated the law of Uta	n, which are set forth directly or by reference in this Licensing, State of Utah or the Residence Lien action of any type reasonably required for the atte my application.
Signature of Affiant:	Date:
Printed Name:	

Homeowner's Name	
Homeowner's Address	
Homeowner's City, State, & Zip	
Homeowner's Telephone Number	
	PROFESSIONAL LICENSING MERCE, STATE OF UTAH
Homeowner's Name v Original Contractor	CERTIFICATE OF SERVICE To the Original Contractor
I hereby certify that on the day of the CERTIFICATE OF COMPLIANCE APPLICAT	ION to
for services provided on property owned by	(original contractor's name) (Homeowner's Name)
by depositing a copy in the U.S. mail, return receipt in Contractor: Address: Street Address (including Apt/Unit/Ste #) and/or PO Box	requested, postage pre-paid, addressed to:
	tate: Zip:
DATED thisday of(month)	(year) ·
-	Signature

Homeowner's Name	
Homeowner's Address	
Homeowner's City, State, & Zip	
Homeowner's Telephone Number	
	PROFESSIONAL LICENSING MERCE, STATE OF UTAH
Homeowner's Name v Original Contractor	CERTIFICATE OF SERVICE To the Lien Holder
I hereby certify that on the day of the CERTIFICATE OF COMPLIANCE APPLICATE	
for services provided on property owned by	(homeowner's name)
by depositing a copy in the U.S. mail, return receipt	
Lien Holders:	
Address: Street Address (including Apt/Unit/Ste #) and/or PO Box	
City: S	State: Zip:
DATED thisday of (month)	, (year)
-	Signature