



**RENEWAL/REINSTATEMENT FORM**

LICENSE NUMBER	OCCUPATION / PROFESSION TITLE	RENEWAL FEE	EXPIRATION DATE	REINSTATEMENTS
Please fill in:	<b>Affirmation of Exemption (Handyman)</b>	<b>\$40.00</b>	<b>November 30<sup>th</sup> of odd years</b>	Additional fees are required after expiration. See reverse for details.

↓ NAME AND ADDRESS OF RECORD ↓

↓ ADDRESS / PHONE CORRECTION ↓

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

*Is this a new address?*     Yes     No

This information will be used for all correspondence from DOPL. You may use a business address or PO Box instead of a home address. If your address changes, notify DOPL directly. Do not rely on a postal service forwarding order. Submit changes to [doplweb@utah.gov](mailto:doplweb@utah.gov)

**RENEWAL REQUIREMENTS**

Please note that false, misleading, or fraudulent answers may result in loss of exemption and/or criminal prosecution and are subject to random audit.

**1. LIABILITY INSURANCE** - With your renewal application, please complete the information below *and* **SUBMIT A COPY OF YOUR UNEXPIRED GENERAL LIABILITY INSURANCE CERTIFICATE** \$100,000 for each incident and \$300,000 in total minimum. The policy must be active and must name DOPL at 160 E 300 S, P.O. Box 146741, Salt Lake City, Utah 84114, as certificate holder.

Name of Insurance Company: \_\_\_\_\_

Phone Number of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Aggregate Liability Coverage Amount: \_\_\_\_\_

**AFFIDAVIT / SIGNATURE**

Read the following carefully. Sign below or follow the instructions as indicated.

**Please Select ONE:**

- I am a United States citizen OR a non-citizen of the United States who is lawfully present
- I am a foreign national not physically present in the United States
- None of the above (please explain): \_\_\_\_\_

Driver's License or State ID card: \_\_\_\_\_  
State of issue                      ID/License Number                      Expiration date

**NOTE:** If you do not hold a US Driver's license or a US State ID, you must present a legible copy of your current and valid government issued documents(s) showing evidence of lawful presence in the United States.

- I certify under penalty of perjury that I am a United States citizen or a qualified alien who is lawfully able to work in the United States.
- I also certify that I have completed or will complete all renewal requirements, if applicable, including those specified below before the expiration or reinstatement of my license. I understand that I may be subject to audit by DOPL of having met these requirements.
- I further certify that I am the licensee described and identified in this application for license renewal / reinstatement. I am qualified in all respects for the renewal or reinstatement of this license. To the best of my knowledge, the information contained in this application is complete and correct, and is free of fraud, misrepresentation, or omission of material fact. 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.

(If Sole Proprietor) Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (If unable to sign, see **Additional Required Documentation** on page 2 for instructions.)

**RENEWAL REQUIREMENTS** *Specific to your license:*

Utah Code 58-55-305: a person engaged in the alteration, repair, remodeling, or addition to or improvement of a building with a contracted or agreed value of less than \$3,000, including both labor and materials, and including all changes or additions to the contracted or agreed upon work and if the total value of the project is greater than \$1,000, the person shall file with the division a one-time affirmation, subject to periodic reaffirmation as established by division rule, that the person has public liability insurance in coverage amounts and form established by division rule and if applicable, workers compensation insurance which would cover an employee of the person if that employee worked on the construction project.

**Unlawful Conduct:** Your license will automatically expire unless you renew it prior to its expiration date. If your license expires you may not practice until a new license is issued.

Subsection 58-1-501(1)(a) and Section 58-1-502, U.C.A., make it unlawful and punishable as a criminal offense to practice your occupation or profession beyond the expiration of your license.



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### **ADDITIONAL REQUIRED DOCUMENTATION**

- A. If you cannot sign the Affidavit on the first of this renewal, you must submit a complete written explanation of why you cannot sign. If applicable, this explanation must include the reasons you have not or will not complete the continuing education requirements before the expiration or reinstatement of your license. DOPL personnel will reach a renewal decision on a case-by-case basis after a thorough review of your explanation. Additionally, you may be requested to provide additional information if the documentation submitted is insufficient.

### **CHECKLIST FOR TIMELY RENEWAL / REINSTATEMENT BY MAIL**

- Answer all of the certification questions on pages 1 & 2, and provide additional documentation, if applicable (#A & B above).
- Sign the Affidavit on page 2 or submit a complete explanation of why you cannot sign (#C above).
- Pay the correct fee. If reinstating a license after the expiration date, you must pay an additional reinstatement fee.
- Sign your check or money order. **DO NOT SEND CASH.** (Make checks or money orders payable to "DOPL.")
- Enclose documentation of your legal name change, if applicable.
- Mail all fees, forms, and documentation to DOPL at PO Box 146741, Salt Lake City, UT 84114-6741.

**LEGAL NAME CHANGE:** If your legal name has changed, you must verify the change by submitting a copy of a marriage certificate, divorce decree, court order, social security card, or contractor name change form. If your name change represents a new business entity, you must submit a new application for licensure before beginning practice as the new entity.

**ADDRESS OR EMAIL CHANGE:** You must keep your address current with DOPL, including your email address. You cannot rely on postal service forwarding. Submit changes online at [www.dopl.utah.gov](http://www.dopl.utah.gov). (If licensed as an entity, including sole proprietor, you must also notify the Utah Division of Corporations of any change: (801) 530-4849.)

**TIMELY RENEWAL:** You are responsible to comply with all renewal / reinstatement requirements in statute and rule, and your license will automatically expire unless you renew it prior to its expiration date. Therefore, you are encouraged to save time by renewing online at [www.dopl.utah.gov](http://www.dopl.utah.gov) where you can immediately print out a confirmation of renewal.

**APPLICATION APPROVAL:** Your application will be approved unless you do not meet the renewal / reinstatement requirements or have engaged in serious misconduct. Licenses with specific requirements listed on page 1 of this form may be subject to audit by DOPL. Those selected for audit will be notified. DOPL reserves the right to initiate action at any time against a licensee who did not meet the renewal / reinstatement requirements at the time the license was issued.

**NON-REFUNDABLE FEES:** Renewal fees paid with this application are for processing your request for renewal of licensure and are non-refundable. Simply paying the fees does not mean that your license will be automatically renewed.

**REINSTATEMENT FEES:** If you fail to timely renew your license, you will be subject to the following conditions:

- If you are reinstating your license within 30 days after the expiration date of your license, you must submit the renewal fee **PLUS** an additional \$20.00 for **EACH** license being reinstated.
- If you are reinstating your license after 30 days and within two years of the expiration date of your license, you must submit the renewal fee **PLUS** an additional \$50.00 for **EACH** license being reinstated. (Reinstating Lien Recovery Fund members must also submit another \$50.00 in addition to any special LRF assessments.)
- Fees are subject to change each July 1. If listed, the fees on the application are current at the time printed. Please verify the current fee at [www.dopl.utah.gov](http://www.dopl.utah.gov) if applying for reinstatement more than one year following expiration of your license.

**NOTICE: If you fail to reinstate your license within two years of the expiration date of your license, you must submit a new application, meet current requirements for licensure, and pay the fees specified in subsection R156-1-308g (3). Contact DOPL for assistance if reinstating after two years of expiration.**

**ON-LINE RENEWAL INFORMATION:** Most professional licenses can be renewed on-line at [www.dopl.utah.gov](http://www.dopl.utah.gov) by using a credit or debit card and a unique "Renewal ID Number" (similar to a pin number). This timesaving system allows for convenient license renewal. The updated license should be emailed to the email in your record on the next business day. Contact DOPL if you do not have a renewal ID number.

**TAX ID NUMBER:** The Tax ID Number for the Division of Professional Licensing is 87-6000545.

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## 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 Company     Contractor     Handyman

License/Registration Number: \_\_\_\_\_ - \_\_\_\_\_

Business Legal Name: \_\_\_\_\_  
*Note: If you are a Sole Proprietor, this is your full legal name.*

DBA (if applicable): \_\_\_\_\_

**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     No

**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.*

Mailing Address     Phone Number     Email Address

**Please complete all fields below for which you selected above:**

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 § [58-55-702](#).

I understand that I am responsible to update the Division of any changes relating to my license/certification/registration. See Utah Code § [58-1-301.7](#)

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

<b>Signature</b>	<b>Date</b>
<b>Printed Name</b>	<b>Title/Position</b>

**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 via US Postal Service:**  
 Division of Professional Licensing  
 PO BOX 146741  
 Salt Lake City, UT 84114-6741

*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.*