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Lieutenant Governor

Division of Professional Licensing
UTAH DEPARTMENT OF COMMERCE

MARGARET W. BUSSE
Executive Director

MARK STEINAGEL
Division Director

Clear Form

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**, Utah Code § 38-11, 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 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 dopl.utah.gov/residence-lien-recovery-fund/forms/.

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

Division of Professional Licensing
UTAH DEPARTMENT OF COMMERCE

LIEN RECOVERY FUND – PRIVACY NOTICE

The information you provide on this form will be used to determine your eligibility for a disbursement from the Residence Lien Recovery Fund or a Certificate of Compliance through the Utah Residence Lien Restriction and Lien Recovery Fund Act. Failure to provide complete information as requested will result in the denial of your request as incomplete.

Information provided in this form is retained in accordance with state record retention laws. For specific information about the records retention for this form, please visit https://dopl.utah.gov/records

Many items collected by the Division are classified as "public" under the Governmental Records Access and Management Act, Utah Code § 63G-2-101 et. seq.. To comply with legal and regulatory requirements, we may share limited information about your application with authorized parties. This may include government agencies, permissive parties, or legal counsel. We may also share aggregated and de-identified data with relevant stakeholders for data analysis and reporting purposes.

Division of Professional Licensing
UTAH DEPARTMENT OF COMMERCE

CERTIFICATE OF COMPLIANCE AFFIDAVIT OF COMPLIANCE APPLICATION

If you contracted for $5,000 or less (based on total project cost, not just the portion regarding lien or lien amount): 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 dopl.utah.gov/residence-lien-recovery-fund/forms/.

IMPORTANT: If you are summoned in a foreclosure action, your application must be received by the Division within 30 days of when you are served with the summons. See Utah Code § 38-1a-701(6)(d)

Applications ARE NOT accepted by email or fax.

Homeowner's Name: _____

Address of Property: _____

City: _____ **State:** _____ **Zip:** _____

Phone: (_____**)** _____ **–**_____ **Email:** _____

Mailing Address: _____ _____ _____ _____
Mailing address or PO Box *City* *State* *Zip*

Tax Parcel Number (found on your annual 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: constructionprograms@utah.gov

Once an application is submitted to the Division, please allow 6-8 weeks for processing. Processing times can vary depending on current conditions.

Applications are NOT accepted by email or fax.

Applications are considered received by the Division on the date the Division stamps it as received. See Utah Admin Rule R151-4-107 for computation of time.

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* LOCATED AT: _____ *Physical address* _____ *City:* *State:* *Zip:* Tax Parcel Number _____	AFFIDAVIT OF COMPLIANCE

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 statutes and rules pertaining to my application for Certificate of Compliance.
3. I entered into an oral or written contract on _____ for service, labor, or materials with: _____ and the general contract, including all changes and additions, totaled: $_____ .
4. The following entities have demanded payment for service, labor or materials associated with the general contract: (attach separate sheet if needed)

_____

_____

5. The residence is a single-family dwelling or duplex and contains no more than two separate living units. See Utah Code § 38-11-102(21).
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 Utah Code § 38-11-102(17).

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 _____
(Original Contractor's Name)

for services provided on property owned by_____,
(Homeowner's name)

by depositing a copy in the U.S. mail, return receipt requested, postage pre-paid, addressed to:

Contractor: _____

Address: _____
Street Address (including Apt/Unit/Ste #) and/or PO Box

City: _____ State: _____ Zip: _____

DATED this _____ day of _____ , _____ .
(Date) *(Month)* *(Year)*

_____
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 _____ _____ , I served a copy of
(Date) *(Month)* *(Year)*

the CERTIFICATE OF COMPLIANCE AFFIDAVIT OF COMPLIANCE APPLICATION and

AFFIDAVIT OF COMPLIANCE to _____
(Lien Holder's Name)

for services provided on property owned by _____,
(Homeowner's Name)

by depositing a copy in the U.S. mail, return receipt requested, postage pre-paid, addressed to:

Lien Holders: _____

Address: _____
Street Address (including Apt/Unit/Ste #) and/or PO Box

City: _____ State: _____ Zip: _____

DATED this _____ day of _____ , _____ .
(Date) *(Month)* *(Year)*

_____
Signature