

STATE OF UTAH
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING
APPLICATION FOR LICENSURE
CONTRACTOR

APPLICATION INSTRUCTIONS AND INFORMATION

General Statement: The Utah Division of Occupational and Professional Licensing (DOPL) desires to provide courteous and timely service to all applicants for licensure. To facilitate the application process, **submit a complete application form including all applicable supporting documents and fees.** Failure to submit a complete application and supply all necessary information will delay processing and may result in denial of licensure. The fees are for processing your application and will not be refunded. **Please read all instructions carefully.**

Address of Record: The address you provide on this application will be your address of record. All correspondence from DOPL will be sent to that address. You are responsible to directly notify DOPL of any change to your address of record. Do not rely on a forwarding order.

Social Security Number: Your social security number is classified as a private record under the Utah Government Records Access and Management Act. It is used by DOPL as an individual identifier. It is also used for child support enforcement pursuant to Subsection 78-32-17(3) and is mandatory pursuant to Subsection 58-1-301(1), Utah Code Ann., which implements 42 U.S.C. 666(a)(13). If an SSN is not provided, the application is incomplete and may be denied.

SUPPORTING DOCUMENTS AND FEES:

Complete the following, in addition to submitting a completed application:

1. **Registration with the Utah Division of Corporations:** Before your license can be activated, your DBA, partnership, limited liability company, or corporation, must be registered and activated by the Utah Division of Corporations. If this is not done, your application for licensure will be delayed.

Sole Proprietorships: The license will be issued to the individual in his/her own given name. Business must be conducted in the name on the license. However, business can be conducted under another name by means of a DBA. The DBA must be submitted to DOPL as a part of the application or later by filling out a “Contractor Name Change or Add a DBA” form (available at www.dopl.utah.gov). The DBA must be owned by the licensee (name on the contractor license) and be registered and in an active status with the Utah Division of Corporations.

2. **General Liability Insurance:** Submit a “Certificate of Insurance,” containing an active policy number, issued by the applicant’s public liability insurance carrier. This certificate is a separate document provided by your insurance agent. Copies of a policy and statement of coverage are not acceptable, and we do not accept incomplete or inaccurate certificates. The minimum required coverage is \$100,000 for each occurrence and \$300,000 in the aggregate. The named insured, including the type of business entity (Inc., LLC, etc.) and address of insured listed on the certificate must be the name and address of the applicant. The certificate holder must be named as DOPL at PO Box 146741, Salt Lake City, UT 84114-6741.

NOTE: An active insurance policy must be maintained on all active contractor licenses, whether or not current construction activity is being performed.

3. **Hiring Employees:** If the applicant currently has employees, or intends to hire in the next 12 months, you must submit the information required in either section A or B below:

A. Contractors that do not use a professional employer organization (PEO):

1. **Workers’ Compensation:** Submit a “Certificate of Insurance” issued by the applicant’s workers’ compensation insurance carrier. The named insured listed on the certificate must be the same as the name on this application. The certificate holder must be named as DOPL at PO Box 146741, Salt Lake City, UT 84114-6741.

For an applicant whose office is located outside of Utah, the certificate must show that the insurance covers employees working in Utah.

NOTE: An active policy must be maintained on all active contractor licenses, whether or not current construction activity is being performed.

2. **Unemployment Insurance:** Submit a copy of the registration form or quarterly billing from the Utah Department of Workforce Services. The document must show the applicant’s name and account number printed on it by the department. The name on the account must be the same as the name on this application.
3. **Utah State Tax ID Number:** Submit a copy of a return or payment coupon. The document must show the applicant’s name and payroll withholding tax account number printed on it by the Utah State Tax Commission. The name on the account must be the same as the name on this application.
4. **Federal Tax ID Number:** Submit a copy of a return or payment coupon. The document must show the applicant's name and federal ID number printed on it by the Internal Revenue Service (IRS). The name on the account must be the same as the name on this application.

- B. Contractors that use a registered professional employer organization (PEO):
1. Agreement: Submit an executed copy of the agreement between the applicant and the PEO.
 2. Workers' Compensation: Submit a "Certificate of Insurance" issued by the applicant's workers' compensation insurance carrier. The applicant must be listed as the insured or a co-insured on the certificate. The name insured must be the same as the name on this application.

For an applicant whose office is located outside of Utah, the certificate must clearly show that the insurance covers employees working in Utah.

4. **Affidavit Claiming No Employees**: If the applicant does not currently have and does not plan to hire employees in the next 12 months, complete the "Affidavit Claiming No Employees," found on page 14 of this application.

AND

- A. **If registered as a C-Corporation**, you must also submit the following:

1. Utah State Tax ID Number: Submit a copy of a return or payment coupon. The document must show the applicant's name and payroll withholding tax account number printed on it by the Utah State Tax Commission. The name on the account must be the same as the name on this application.
2. Federal Tax ID Number: Submit a copy of a return or payment coupon. The document must show the applicant's name and federal ID number printed on it by the Internal Revenue Service (IRS). The name on the account must be the same as the name on this application.

- B. **If registered as an S-Corporation**, you must also submit the following:

1. IRS Form 2553: Submit this form to document your S-Corp status.
2. Federal Tax ID Number: Submit a copy of a return or payment coupon. The document must show the applicant's name and federal ID number printed on it by the Internal Revenue Service (IRS). The name on the account must be the same as the name on this application.

5. **Original Test Score Letter(s)**: Submit the original letters from Thomson Prometric with the applicant's qualifying individual's passing score(s) for the Utah Contractor Business - Law Examination **and** any required trade examination(s). (Keep copies for your records.)

If the qualifier on this application already passed the required Utah Contractor Business - Law Examination and any trade examination (if applicable) for the classification(s) of licensure being requested, the qualifier does not have to retake the examinations.

However, if the qualifier on this application has been out of the construction trade for more than ten (10) years and has not remained employed in the applicable license classification(s), the qualifier would have to re-qualify for the experience portion of the qualifier requirements, but would not have to retake the examinations. (See the Affidavit of Qualifying Experience found in this application for guidelines on these requirements.)

Waiver of Trade Examination: A trade exam may be waived if the qualifier has passed certain specific trade exams for license classifications in the reciprocity states of Arizona, California, Louisiana, Nevada, or South Carolina. A list of states and their license classifications that may be reciprocated can be viewed at www.dopl.utah.gov.

In order to verify a trade exam from a reciprocal state, submit a completed, original “Request for Verification of License” (attached to this application).

6. **Qualifying Experience:** You must document qualifying experience according to the following for each classification for which you are applying. Complete each option that is applicable to your circumstances.

Critical Note: You must review #5, #6, and #7 of “Additional Important Information” below (pages 6-8) for an outline of the qualifying experience requirements.

- A. For Utah Qualifiers Only – Complete Page 19: If you are or have been a qualifier in the state of Utah within the past 10 years, complete the “Utah Qualifier Verification” form (attached to this application).
- B. For Utah Employees Only – Employers Complete Page 21: If you are or have been an owner or employee, but not the qualifier, of a licensed Utah contractor within the past 10 years, complete the “Affidavit of Qualifying Experience Working under a Licensed Utah Contractor” form (attached to this application).

NOTE: To support the experience claimed for all license classifications (except for trades requiring a master electrician license or a journeyman plumber license) each individual listed as a qualifier on the application must submit one of the following, in addition to the requirements listed above:

- W-2’s (If the W-2’s list the PEO as the employer, include a statement from the PEO, on their letterhead, stating the contractor(s) worked for and the year and number of hours worked per year.)
- company tax returns including K-1’s

- C. For Endorsement States Only – Complete Pages 23 and 24: If you are or have been a qualifier, RME, or RMO of a licensed contractor in Arizona, California, Louisiana, Nevada, or South Carolina and have passed certain trade exams for the classifications reciprocated with, submit a completed “Request for Verification of License” form (attached to this application).

NOTE: You cannot reciprocate a license from a state where you have not tested. Applicants from Louisiana or South Carolina must have held their license the number of years equivalent to the Utah experience requirement for the license classification(s) for which they are applying. (A list of states and their license classifications that may be reciprocated can be viewed at www.dopl.utah.gov.)

- D. If none of the options listed above (A, B, or C) apply to you, submit one of the following in addition to the requirements listed above:
- W-2’s (If the W-2’s list the PEO as the employer, include a statement from the PEO, on their letterhead, stating the contractor(s) worked for and the year and number of hours worked per year.)
 - personal tax returns including all schedules
 - company tax returns including K-1’s

Additionally, you must also submit the following:

1. For supervisory experience, provide at least two letters from building officials.
2. For non-supervisory experience, provide at least two letters from building officials, building inspectors, and/or contractors with whom you have worked.

NOTE: Letters must be on official letterhead, must be dated and signed, must state how long the building official, building inspector, or contractor has known the individual to be an employee of the licensed contractor, and what the individuals’ specific responsibilities were during that period of time. If you were a contractor, the person writing your letter needs to state the kind and extent (size of projects) of construction work you did.

7. **Financial Responsibility:** Complete the Financial Responsibility Section of the “Contractor Qualifying Questionnaire.”

OR

Submit a DOPL “Aggregate Bonding Limit” form that has been filled out and signed by the applicant and the applicant’s bonding company, verifying the aggregate bonding limit. (These forms are available from DOPL upon request.)

8. **Licensing Fees:** Submit the applicable non-refundable, application-processing fees, which can be submitted in one check made payable to “DOPL.”
- ❑ \$210.00 for an E100 General Engineering Contractor license
 - ❑ \$210.00 for a B100 General Building Contractor license
 - ❑ \$210.00 for an R100 Residential & Small Commercial Building Contractor license
 - ❑ \$210.00 for a license in a specialty classification (first classification only)
 - ❑ \$110.00 for each additional specialty classification after the first initial classification
9. **Residence Lien Recovery Fund:** Submit the \$195.00 initial assessment.

OR

Complete the “RLRF Exemption Certificate” section of this application. Only those that are applying for a contractor classification that is exempt from membership in the Fund may sign the exemption certificate. (Exempt classifications are listed on the exemption certificate.) Because all non-exempt license classifications allow the licensee to work in residential construction, applicants for licensure in these classifications are required to join whether or not they intend to work in residential construction. The initial assessment fee for membership in the Residence Lien Recovery Fund will be refunded upon written request of the applicant if the application for licensure is denied.

NOTE: Although the application-processing fees (#8 above) are non-refundable, the \$195.00 initial assessment fee may be refunded upon request if licensure is denied. All fees required may be submitted in a single payment, made payable to “DOPL.”

ADDITIONAL IMPORTANT INFORMATION:

1. **Specific Trade Examination(s):** Certain license classifications require passing a trade examination. Applicants must apply directly to Thomson Prometric at www.experioronline.com or 1-800-882-3981 to register for the trade examinations.
2. **Business-Law Exam:** All qualifiers must pass the Utah Contractor Law Exam. Contact Thomson Prometric at www.experioronline.com or 1-800-882-3981 to register for the exam.

The following applicable laws and rules are available on the Internet at www.dopl.utah.gov:

- ❑ Division of Occupational & Professional Licensing Act
- ❑ General Rules of the Division of Occupational & Professional Licensing
- ❑ Utah Construction Trades Licensing Act
- ❑ Utah Construction Trades Licensing Act Rules
- ❑ Utah Residence Lien Restriction and Lien Recovery Fund Act
- ❑ Utah Residence Lien Restriction and Lien Recovery Fund Rules

3. **Examination Fees:** There are separate fees for all examinations. It is the responsibility of the applicant to submit the fees directly to the testing agency.
4. **Current Documents:** Applications, statutes, rules, and forms are occasionally changed. Go to www.dopl.utah.gov to ensure you have the most recent version of these documents.
5. **Qualifying Experience:** You must document qualifying experience according to the following for each classification for which you are applying.

General Requirements for All License Classifications:

- All experience must be under the direct supervision of the applicant's employer.
- All experience must have been directly related to the scope of practice of the classification the applicant is applying for, as determined by DOPL.
- One year of work experience is equivalent to 2,000 hours.
- No more than 2,000 hours of experience may be claimed during any 12 months.
- Experience obtained under the supervision of a construction trades instructor as a part of an educational program does not qualify.

A. Additional Requirements for the Following License Classifications:

E100 (General Engineering)

B100 (General Building)

R100 (Residential and Small Commercial)

- A minimum of four years experience, within the past ten years, must have been obtained as an employee of a contractor licensed in the license classification applied for or the substantial equivalent of a contractor licensed in that license classification as determined by DOPL.
- Two of the required four years of experience must have been obtained in a supervisory or managerial position.
- A person holding a four-year bachelor's degree or a two-year associate degree in Construction Management may have one year of experience credited towards the supervisory or managerial experience requirement.

B. Additional Requirements for the Following License Classifications:

S280 (General Roofing)

S290 (General Masonry)

S360 (Refrigeration)

S350 (Heating, Ventilating, and Air Conditioning)

S320 (Steel Erection)

S370 (Fire Suppression Systems)

- A minimum of four years experience, within the past ten years, must have been obtained as an employee of a contractor licensed in the license classification applied for or the substantial equivalent of a contractor licensed in that license classification as determined by DOPL.

C. Additional Requirements for All Classifications NOT listed in A or B above:

- A minimum of two years experience, within the past ten years, must have been obtained as an employee of a contractor licensed in the license classification applied for or the substantial equivalent of a contractor licensed in that license classification as determined by DOPL, except for plumbing and electrical qualifiers. (See #6 below.)

6. **Electrical and Plumbing Qualifiers:** For each of the following contractor license classifications, the qualifier must meet the requirements specified. Additionally, an active electrician or plumber license must be held by the qualifier prior to the issuance of a contractor license and must remain active as long as the person is a qualifier.

- S200 General Electrical Contractor qualifier must be a Utah licensed master electrician.
- S201 Residential Electrical Contractor qualifier must be either a Utah licensed master electrician or a Utah licensed residential master electrician.
- S210 General Plumbing Contractor qualifier must be a Utah licensed journeyman plumber.
- S217 Residential Plumbing Contractor qualifier must be either a Utah licensed journeyman plumber or a Utah licensed residential journeyman plumber.

7. **Trades Instructors:** For each of the following trades instructor license classifications, the qualifier must meet the requirements specified.

I101 (General Engineering Trades Instructor)

I102 (General Building Trades Instructor)

I103 (Electrical Trades Instructor)

I104 (Plumbing Trades Instructor)

I105 (Mechanical Trades Instructor)

- An applicant for construction trades instructor license shall have the same experience that is required for the license classifications for the construction trade they will instruct.
- Each applicant for licensure as an I103 (Electrical Trades Instructor) must also be licensed as either a journeyman or master electrician or a residential journeyman or residential master electrician.
- Each applicant for licensure as an I104 (Plumbing Trades Instructor) must also be licensed as a journeyman plumber or a residential journeyman plumber.

8. **License Renewal:** All contractor licenses expire Nov. 30 of every odd-numbered year.

Unlike many other states, Utah's license renewal schedule **is not** based on the licensee's date of initial licensure. Under Utah's renewal system, all licenses in each profession expire as a group on the same day every two years. Therefore, the length of a licensee's first renewal cycle depends on how far into the current renewal cycle initial licensure was obtained. Each renewal cycle thereafter is for a full two years.

Additionally, the fee paid with this application for licensure is an application-processing fee only. It does not include a renewal fee. Each licensee is responsible to renew licensure **PRIOR** to the expiration date shown on the current license. Approximately three months prior to the expiration date shown on the license, renewal information is disseminated to each licensee's last address of record, as provided to DOPL.

9. **Continuing Education:** In accordance with Subsection R156-55a-303(a) and (b), during each two-year renewal cycle, each licensee or the licensee's qualifier, an officer, director, or supervising individual, as designated by the licensee, must complete 3 hours of core continuing education (construction codes, construction laws and rules, and construction practices) AND an additional 3 hours of professional continuing education directly related to the licensee's professional practice. The continuing education requirement for electrical contractors in Subsection R156-55b-304 satisfies the continuing education requirement for contractors. However, courses in office and business skills, physical well-being and personal development, or meetings held in conjunction with the general business of the licensee do not meet this requirement.

10. **Important Addresses and Telephone Numbers:**

❑ **Utah Division of Corporations and Commercial Code**
160 East 300 South, 1st Floor, Salt Lake City, Utah 84114-6705
(801) 530-4849, (801) 530-6447, (877) 526-3994 (toll-free)
www.commerce.utah.gov (Click on "Corporations.")

❑ **One-Stop Online Business Registration System**
www.commerce.utah.gov (Click on the "One-Stop" link.)

NOTE: Applicants may register for the following three tax registrations through the One-Stop Online Business Registration System or by contacting each of the individual agencies listed below.

❑ **Utah Department of Workforce Services, Unemployment Insurance**
140 East 300 South, Salt Lake City, Utah 84111
(801) 526-9235

❑ **Internal Revenue Service**
50 South 200 East, Salt Lake City, Utah, 84111
(800) 829-3676 (toll-free)

❑ **Utah State Tax Commission**

210 North 1950 West, Salt Lake City, Utah 84134
(801) 297-2200 or (800) 662-4335 (toll-free)

11. **Updating Address Information:** It is your responsibility to maintain a current address with DOPL. If your address is incorrect, you will not receive renewal notices or other correspondence. Address changes can be made online at www.dopl.utah.gov.
12. **Ceremonial Certificate of Licensure:** After obtaining your license from DOPL, you can order a Ceremonial Certificate of Licensure, printed on parchment paper with original signatures and an embossed gold seal. Order forms can be obtained at www.dopl.utah.gov.
13. **Mail Complete Application to:**

By U.S. Mail

Division of Occupational & Professional Licensing
P.O. Box 146741
Salt Lake City, Utah 84114-6741

By Delivery or Express Mail

Division of Occupational & Professional Licensing
160 East 300 South, 1st floor
Salt Lake City, Utah 84111

14. **Telephone Numbers:** (801) 530-6628
(866) 275-3675 – Toll-free in Utah
15. **Fax Number:** (801) 530-6511

DOPL OFFERS A FREE CLASS TO ASSIST YOU IN FILLING OUT THIS APPLICATION AND TO ANSWER YOUR QUESTIONS.

GO TO DOPL'S WEBSITE (www.dopl.utah.gov) FOR CLASS DATES, TIMES, AND LOCATIONS OR CALL THE PHONE NUMBERS LISTED ABOVE.

REMEMBER TO KEEP COPIES OF EVERYTHING SUBMITTED TO DOPL FOR FUTURE REFERENCE OR RESUBMISSION, IF NECESSARY.

APPLICATION FOR LICENSURE

APPLICATION FOR: (Check all that apply.)

_____ Residence Lien Recovery Fund Registration

_____ General Engineering Contractor (E-100)

_____ General Building Contractor (B-100)

_____ Residential and Small Commercial Contractor (R-100)

_____ Specialty: Number: _____ Title: _____

 Number: _____ Title: _____

 Number: _____ Title: _____

BUSINESS LEGAL NAME: _____

Employer Identification Number (EIN): _____

Utah Division of Corporations Registration Number: _____

Business Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone(s): _____

QUALIFIER'S NAME: First _____ Middle _____ Last _____

Qualifier's Address: _____

Qualifier's Phone Number(s): _____

Qualifier's Social Security Number: _____ Date of Birth: _____

Qualifier's Position: (Check all that apply.) ___ owner ___ officer ___ manager

DO NOT WRITE IN THIS SECTION - FOR DIVISION USE ONLY

License Number: _____

Qualifier License Number: _____

Corporation registration: _____

The business legal name is the name that will appear on the license and is the actual name under which the contracting business must be conducted. If the applicant for licensure is a business entity, this is the name registered with the Utah Division of Corporations. If you also want to use a DBA (doing business as name) with the license, also list that name on the application. For a business entity other than a sole proprietorship or partnership, the DBA will not be printed on the license. If you are going to operate under your own personal given name, it will also be your business name. However, if you add a word after your given name such as "Construction" or "Builders," etc., then that name must be registered as a DBA with the Utah Division of Corporations, and that DBA will be printed on the license. ** Any license issued under this application belongs to this entity. Any entity change after a license is issued requires a new application and new fees in order to license the new entity.*

TYPE OF BUSINESS ENTITY* (Check one.)

C Corporation

 S Corporation
 General Partnership

 Limited Partnership
 Sole Proprietorship

 Limited Liability Company
 Other Type of Business: _____

IDENTIFYING INFORMATION FOR BUSINESS ENTITY TYPE:

(1) For corporations, complete the identifying information requested below for all stockholders, unless publicly traded, and for all elected officers and directors. (2) For a partnership, provide information for all partners. (3) For a sole proprietor, provide information for the owner. (4) For a limited liability company, or any entity type not mentioned, provide information for all members or management. (Use additional sheets if necessary.)

NOTE: The percentages of ownership for all persons listed below must total 100%.

Full Name: _____ **Social Security Number:** _____

Position Title: _____ **% of ownership** _____ **Date of Birth:** ____/____/____

Mailing Address: _____ **State:** _____ **Zip:** _____

Full Name: _____ **Social Security Number:** _____

Position Title: _____ **% of ownership** _____ **Date of Birth:** ____/____/____

Mailing Address: _____ **State:** _____ **Zip:** _____

Full Name: _____ **Social Security Number:** _____

Position Title: _____ **% of ownership** _____ **Date of Birth:** ____/____/____

Mailing Address: _____ **State:** _____ **Zip:** _____

Full Name: _____ **Social Security Number:** _____

Position Title: _____ **% of ownership** _____ **Date of Birth:** ____/____/____

Mailing Address: _____ **State:** _____ **Zip:** _____

LICENSES:

List all licenses issued by any state, including Utah, which the applicant's qualifying individual(s) and/or owner(s) now hold or have ever held in a construction related occupation or profession. (Use additional sheets if necessary.)

Issuing State: _____ **Profession:** _____

Name on License: _____

License Number: _____ **Expiration Date:** _____

License Status: _____

Issuing State: _____ **Profession:** _____

Name on License: _____

License Number: _____ **Expiration Date:** _____

License Status: _____

COMPLIANCE WITH UTAH LAWS AND RULES

I understand it is my continuing responsibility to read, understand, and apply the requirements contained in all statutes and rules pertaining to the occupation or profession for which I am applying, and that failure to do so may result in civil, administrative, or criminal sanctions.

Signature of Applicant: _____ **Date:** _____

AFFIDAVIT CLAIMING NO EMPLOYEES:

Applicant's Business Legal Name: _____

I being first duly sworn declare under penalty of perjury as follows:

I am authorized to sign this Affidavit on behalf of the above named applicant. The applicant does not at the present time hire employees and does not intend to do so within the foreseeable future. If the applicant later wishes to begin hiring employees, the applicant will first register with each of the payroll tax authorities and obtain workers' compensation insurance and provide evidence of each registration and a certificate of workers' compensation insurance to DOPL. The applicant is being granted an exemption to the requirements of Utah Code Ann. Sections 58-55-302(2)(a) and (c) based upon this affidavit and agreement.

The applicant's failure to fulfill the above requirements will be considered unprofessional conduct and may be the basis for disciplinary action which could include a warning, reprimand, probation, suspension, or revocation of the applicant's contractor license. This affidavit is considered a public document and may be released to any party including payroll tax authorities.

Name of Applicant's Representative (please print): _____

Position/Title of Applicant's Representative: _____

Signature of Applicant's Representative: _____

Date of Signature: _____

RESIDENCE LIEN RECOVERY FUND EXEMPTION CERTIFICATE*:

I being first duly sworn declare under penalty of perjury as follows:

I am authorized to sign this Certificate of Exemption from Registration on behalf of the above named applicant. I hereby certify that the above named applicant is applying for a contractor license in a classification that is not subject to automatic registration with the Residence Lien Recovery Fund under Title 31, Chapter 11, U.C.A. I hereby certify that the above named applicant will NOT be providing qualified services for residential housing construction, as defined in Utah Code Ann. Section 38-11-2(15), and is not required to register with the Residence Lien Recovery Fund as set forth in the provisions of Title 31, Chapter 11, U.C.A.

I acknowledge that false certification of exemption from registration with the Fund may result in the loss of the above named licensee's license and possible criminal prosecution. I recognize that by certifying that the applicant is exempt from registration with the Residence Lien Recovery Fund, the applicant will not be entitled to make claims against or recover from the Fund.

Exempt Classifications include:

- | | |
|--|--|
| E100 General Engineering Contractor | S440 Sign Installation Contractor |
| S211 Boiler Installation Contractor | S441 Non Electrical Outdoor Ad Sign Contractor |
| S213 Industrial Piping Contractor | S450 Mechanical Insulation Contractor |
| S262 Gunnite and Pressure Grouting Ctr. | S470 Petroleum System Contractor |
| S320 Steel Erection Contractor | S480 Piers and Foundations Contractor |
| S321 Steel Reinforcing Contractor | I101 General Engineering Trades Instructor |
| S322 Metal Building Erection Contractor | I102 General Building Trades Instructor |
| S323 Structural Stud Erection Contractor | I103 General Electrical Trades Instructor |
| S340 Sheet Metal Contractor | I104 General Plumbing Trades Instructor |
| S360 Refrigeration Contractor | I105 General Mechanical Trades Instructor |

** If the applicant is applying for any classification that is not listed above, the applicant is required to join the fund and pay the fee.*

Signature of Applicant’s Representative: _____

Date of Signature: _____

CONTRACTOR QUALIFYING QUESTIONNAIRE

GENERAL QUESTIONS

Answer “yes” or “no” to each question. Do not leave any question blank.

Answer each question on behalf of the applicant, any officer, director, partner, proprietor, shareholder (unless publicly traded), member, owner, qualifying managing employee, or manager associated with or employed by the applicant.

1. _____ Have you ever applied for or received a license, certificate, permit, or registration to practice in a regulated profession under any name other than the name listed on this application?
2. _____ Have you ever applied for or become registered with the Residence Lien Recovery Fund under any name other than the name listed on this application?
3. _____ Have you ever been denied the right to sit for a licensure examination?
4. _____ Have you ever had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, or disciplined in any way?
5. _____ Have you ever been permitted to resign or surrender your license, certificate, permit, or registration to practice in a regulated profession while under investigation or while action was pending against you by any professional licensing agency or criminal or administrative jurisdiction?
6. _____ Are you currently under investigation or is any disciplinary action pending against you now by any licensing agency or government agency?
7. _____ Is any action pending against you now by either the Federal Drug Enforcement Administration or any state drug enforcement agency?
8. _____ If you are licensed in the occupation/profession for which you are applying, would you pose a direct threat to yourself, to your clients, or to the public health, safety, or welfare because of any circumstance or condition?
9. _____ Have you ever been declared by any court of competent jurisdiction incompetent by reason of mental defect or disease and not restored?
10. _____ Have you ever been involved as the abuser in any incident of verbal, physical, mental, or sexual abuse?
11. _____ Have you ever been terminated from a position because of drug use or abuse?

(Questions continue on following page.)

12. _____ Are you currently using or have you recently (within 90 days) used any drugs (including recreational drugs) without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law?
13. _____ Have you ever used any drugs without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law, for which you have not successfully completed or are not now participating in a supervised drug rehabilitation program, or for which you have not otherwise been successfully rehabilitated?
14. _____ Do you currently have any criminal action pending?
15. _____ Have you pled guilty to, no contest to, or been convicted of a misdemeanor in any jurisdiction within the past ten (10) years? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
16. _____ Have you ever pled guilty to, no contest to, or been convicted of a felony in any jurisdiction?
17. _____ Have you, in the past ten (10) years, been allowed to plea guilty or no contest to any criminal charge that was later dismissed (i.e. plea in abeyance or deferred sentence)?
18. _____ Have you ever been incarcerated for any reason in any federal, state or county correctional facility or in any correctional facility in any other jurisdiction or on probation/parole in any jurisdiction?

If you answered “yes” to questions 14, 15, 16, 17, or 18 above, you must submit a complete narrative of the circumstances that occurred for EACH and EVERY conviction, plea in abeyance, and/or deferred sentence. You must also attach copies of all applicable police report(s), court record(s), and probation/parole officer report(s).

If you are unable to obtain any of the records required above, you must submit documentation on official letterhead from the police department and/or court indicating that the information is no longer available.

If you have formally expunged a criminal record as evidenced by a court order signed by a judge, you do not need to disclose that criminal history. Expungement orders must be sent to the Bureau of Criminal Identification and the FBI to enable the expungement to be completed and the criminal history eliminated from the records.

If you answered “yes” to any of the above questions, enclose with this application complete information with respect to all circumstances and the final result, if such has been reached.

A “yes” answer does not necessarily mean you will not be granted a license; however, DOPL may request additional documentation if the information submitted is insufficient.

(Information and questions continue on following page.)

FINANCIAL RESPONSIBILITY FOR THE APPLYING BUSINESS ENTITY

Applicants (sole proprietor, partnership, limited liability company, or corporation) for licensure must demonstrate financial responsibility* before a license can be issued. Financial responsibility must be maintained as long as a license is active.

Please answer “**yes**” or “**no**” to the following questions for the business entity applying for the license. Do not leave any question blank.

1. _____ Do total assets (what is owned by the business entity) exceed total liabilities (what is owed by the business entity)?
2. _____ Have all state and federal income taxes, payroll withholding, unemployment, workers’ compensation, and liability insurance premiums been paid as required by law? (Mark “yes” if not applicable.)
3. _____ Have all judgments, liens, taxes, or child support payments been paid as required? (Mark “yes” if not applicable.)
4. _____ Has any claim paid by the Residence Lien Recovery Fund where any owner, officer, director, or qualifier of the applicant been involved, been reimbursed, in full, as required? (Mark “yes” if not applicable.)
5. _____ Has the applicant ever filed for bankruptcy, been subjected to an involuntary petition for bankruptcy, been adjudged bankrupt, or sought protection under the bankruptcy laws during the last 10 years?

If you answered “no” to question 1, 2, 3, or 4 above, please enclose with this application complete information with respect to all circumstances and the final result, if such has been reached. If you answered “yes” to question 5, submit written explanation and all documents and schedules filed with the bankruptcy court. A “no” answer does not necessarily mean the applicant will not be granted a license. However, DOPL may request additional documentation if the information submitted is insufficient.

** If a license is issued and later chosen for audit, the licensee will need to provide to DOPL copies of the financial information the above answers are based upon. Keep a copy of your balance sheet, profit and loss statements, tax returns, etc. for at least two years.*

UTAH QUALIFIER VERIFICATION FORM

List all Utah current or prior contractor licenses for which the qualifier(s) listed on this application are currently qualifier(s) or have previously been qualifier(s).

(Use additional sheets if necessary.)

Name of Qualifier: _____

Qualifier's Current or Prior Utah Contractor License(s):

1. Company Name: _____

Classification: _____ License Number: _____

2. Company Name: _____

Classification: _____ License Number: _____

3. Company Name: _____

Classification: _____ License Number: _____

4. Company Name: _____

Classification: _____ License Number: _____

5. Company Name: _____

Classification: _____ License Number: _____

6. Company Name: _____

Classification: _____ License Number: _____

AFFIDAVIT AND RELEASE AUTHORIZATION

I am authorized to sign this Affidavit and Release Authorization on behalf of the applicant described and identified in this application for licensure in the State of Utah.

The applicant is qualified in all respects for the license, certificate, or registration for which it is applying in this application.

To the best of applicant's knowledge, the information contained in the application and its supporting document(s) is free of fraud, misrepresentation, or omission of material fact. To the best of applicant's knowledge, the information contained in the application and its supporting document(s) is truthful, correct, and complete; and, discloses all material facts regarding the applicant and associated individuals necessary to properly evaluate the applicant's qualifications for licensure.

Applicant will ensure that any information subsequently submitted to the Division of Occupational and Professional Licensing in conjunction with this application or its supporting documents meet the same standard as set forth above.

Applicant understands that it is unlawful and punishable as a class A misdemeanor to apply for or obtain a license or to otherwise deal with the Division of Occupational and Professional Licensing or any licensing board or commission through the use of fraud, forgery, or intentional deception, misrepresentation, misstatement, or omission.

Applicant understands 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.

Applicant authorizes all persons, institutions, organizations, schools, governmental agencies, employers, references, or any others not specifically included in the preceding characterization, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records or information of any type reasonably required for the Division of Occupational and Professional Licensing to properly evaluate the applicant's qualifications for licensure/certification/registration by the State of Utah.

Printed Name of Authorized Signer: _____

Position of Authorized Signer: _____

Signature of Authorized Signer: _____

Date of Signature: _____

Utah Division of Occupational & Professional Licensing
160 East 300 South, P.O. Box 146741
Salt Lake City, Utah 84114-6741

AFFIDAVIT OF QUALIFYING EXPERIENCE WORKING UNDER A LICENSED UTAH CONTRACTOR

TO BE COMPLETED BY THE EMPLOYER VERIFYING THE EXPERIENCE WITHIN THE PAST 10 YEARS: (Use a separate form for each employer. Make copies of this form as necessary.)

Name of Employee: _____

Date Employment Began: ____/____/____ Date Employment Ended: ____/____/____

Total Hours Worked: _____ Total Hours of Supervisory Experience*: _____
(*if applying for an E100, B100, or R100)

Position(s) Held: _____

Description of Experience: (Use additional pages if necessary.) _____

Name of Contractor/Employer: _____

License Number: _____ Contractor's Telephone Number: _____

Address of Employer: _____

I declare under penalty of perjury as follows:

I am the qualifier or authorized signer of a licensed contractor that is engaged in construction activities in the classification specified above, or I am lawfully exempted from licensure, or I am not required to be licensed in the state or jurisdiction in which I perform contracting activities but nevertheless certify that I am a qualified contractor in the classification specified above.

I certify that the employee named herein has obtained qualifying experience as defined herein while employed during the periods of time specified below and the work was satisfactorily performed. (Additional explanation of the work performed may be submitted on separate pages.)

I understand that "Qualifying Experience" means full-time related work performed in lawful employment as an employee of a contractor lawfully engaged in construction activities in the classification for which the applicant has applied and for which the applicant received W-2 wages. I understand that the experience of persons working for a contractor as an independent contractor paid on a 1099 form is not acceptable.

Printed Name of Employer's Authorized Signer: _____ Position: _____

Signature of Employer's Authorized Signer: _____ Date: _____

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(FOR TWO-SIDED PRINTING)

REQUEST FOR VERIFICATION OF LICENSE

(Use this form to verify licensure from Arizona, California, Louisiana, Nevada, or South Carolina ONLY.)

TO BE COMPLETED BY APPLICANT'S QUALIFYING INDIVIDUAL:

If the qualifier has passed certain trade exams for license classifications that are specifically reciprocated with Arizona, California, Louisiana, Nevada, or South Carolina, complete the first section of this form, submit it to the applicable state, and request that the state include the examination information on this form and return it to you for submission with your application.

NOTE: Applicants from Louisiana or South Carolina must have held their license the number of years equivalent to the Utah experience requirement for the license classification(s) for which they are applying. (A list of states and their license classifications that may be reciprocated can be viewed at www.dopl.utah.gov)

Name of Applicant's Qualifier: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number(s): _____

I am requesting licensure in the state of Utah as a: _____

I am/have been licensed in your state under the name: _____

My social security number is: _____

My date of birth is: _____

My license number in your state is/was: _____

Signature of Applicant's Qualifier: _____

(Continued on the reverse.)

TO BE COMPLETED BY THE VERIFYING AGENCY:

Please furnish the information requested, sign and verify the document, place the completed form in a sealed envelope, and provide it to the qualifier in person or by mail. The qualifier will include the verification of licensure with his/her Utah application. Thank you.

Name of Verifying State: _____

Name of Licensee (as it appears in verifying state's records): _____

Name of Qualifying Person: _____

Classification of License Issued: _____

License Number: _____ Current Status: _____

Original Date of Licensure: _____ Expiration Date: _____

Continuously Licensed:

_____ Yes _____ No, please explain: _____

Licensed By:

_____ Exam, Type: _____ Score: _____ Date: _____

_____ Endorsement: from what state? _____

Examination Scores: _____

Education Required for Licensure: _____

Disciplinary Action or Pending Disciplinary Action:

_____ No _____ Yes, please provide certified copies of all Petitions, Orders, etc.

Signature: _____ Date: _____

Name and Title (please print): _____

(SEAL) Agency: _____

Phone Number(s): _____