

Wasatch Lien Service, LLC
3165 East Millrock Drive, Suite 500
Salt Lake City, UT 84121
Phone: (801) 278-5436
Fax: (801) 438-2077

REQUEST TO PREPARE AND RECORD A NOTICE OF COMPLETION ON STATE CONSTRUCTION REGISTRY

Your Company Name

Address

City State Zip

Your Name E-mail Address Phone

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Job Name Legal Description

Job Address City County Zip State

Tax Parcel I.D. Number Entry Number

Project Owner Name Original Contractor Name

Date Project was Complete

I certify that the following condition has been met: (please check only one box)

- I've received a permanent certificate of occupancy
- I've completed a final inspection
- All substantial work is complete

Order Number

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AUTHORIZATION AND LIMITED POWER OF ATTORNEY

The Undersigned, as the authorized representative of (The Company) identified above, hereby appoints Wasatch Lien Service, LLC as its sole and exclusive agent with full power and authority to do, perform, prepare, and execute on its behalf those documents necessary to comply with the Construction Lien statutes of the State in which it has performed labor and/or provided materials for the improvement of that certain real property identified above. It is understood that Wasatch Lien Service, LLC relies on the representation of the undersigned that valid enforceable contracts, written or verbal, exist between The Company and its contracting parties. The Company agrees to indemnify and hold harmless Wasatch Lien Service, LLC for inaccurate or incomplete information provided by The Company or other parties that would result in consequential damages. Bills for services will be due upon receipt, unless otherwise indicated, and you agree to pay promptly all amounts billed. Amounts unpaid after thirty (30) days will be subject to an interest charge of one and one-half percent (1 1/2%) per month, compounded monthly, which you agree to pay. You hereby agree that if it becomes necessary to take action to collect your account, either with or without suit, you will pay all fees and costs incurred in such collection efforts.

Dated: _____

Authorized Representative