STATE OF UTAH - DEPARTMENT OF ADMINISTRATIVE SERVICES

Division of Facilities Construction and Management

DFCM

Contractor's Commitment to Insurance

TO OWNER: **State of Utah**
Division of Facilities, Construction and Management
4110 State Office Building
SLC, UT 84114

PROJECT NAME: _____

PROJECT NO.: _____ **CONTRACT NO.:** _____

DATE: _____

In accordance with the provisions of the Contract between the Owner and the Contractor as indicated above, the
(Insert name and address of Contractor)

, CONTRACTOR,
hereby certifies that insurance required by the Contract Documents shall remain in force after final payment is in effect and will not be canceled or allowed to expire until at least 30 days prior written notice, by certified mail, return receipt request, has been given to the DFCM; and that the Contractor knows of no substantial reason that the insurance will not be renewable to cover the period required by the Contract Documents.

SUPPORTING DOCUMENTS ATTACHED HERETO:

1. A current or additional certificate evidencing that insurance required by the Contract Documents shall remain in force after final payment is in effect and will not be canceled or allowed to expire until at least 30 days prior written notice.

CONTRACTOR:
(Name and address)

BY: _____
(Signature of authorized representative)

_____
(Printed name and title)

Subscribed and sworn to before me on this date:
Notary Public:

My Commission Expires: