HIGF-01, Rev 10/2010

STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
TRADES PRACTICES DIVISION
Telephone: (860) 713-6100

For Official Use Only

APPLICATION FOR REIMBURSEMENT FROM THE HOME IMPROVEMENT GUARANTY FUND

INSTRUCTIONS:

Applications for reimbursement from the guaranty fund must be submitted a minimum of thirty (30) days after the court judgment, but must be received within 2 years from the date of the judgment and must be accompanied by all required supporting documentation. **The maximum amount paid to each consumer is $15,000 per contract.**

You must provide the following documentation to substantiate your claim:

1. Copy of your home improvement contract(s);
2. Copy of the court judgment;
3. Copy of Writ of execution (BOTH Bank and Personal Property) including statement **from officer executing** same, if applicable (not applicable to Small Claims Judgments) and;
4. If bankruptcy discharge, a certified copy of the Discharge of Debtor Notice including the schedule in which you are listed as a creditor; a copy of your contract and a copy of your check to the contractor or other proof of payment to the contractor.

➔ Return your completed application to:
Department of Consumer Protection, Trade Practices Division, (HIGF FUND) 165 Capitol Avenue, Hartford, CT 06106.

CONSUMER INFORMATION:

Name	
Address (No. & Street, City, State, Zip Code)	
Contact Phone Number	Email Address

CONTRACTOR INFORMATION:

Name	Registration Number (if known)
Business Name	Work Telephone Number (with Area code)
Address (No. & Street, City, State, Zip Code)	

Date Contract was signed: / /
(Attach copy of contract)

Was the contractor registered at the time of your written contract or within two years prior to the date you signed the contract or at the time of judgment? ☐ YES ☐ NO **(If you check "NO", you cannot apply to the fund)**

Are you the owner/resident of the private residence located in Connecticut where the home improvement work was to be performed? ☐ YES ☐ NO **(If you check "NO", you cannot apply to the fund)**

Was the improvement for:

☐ Single Dwelling
☐ Multi Family Dwelling # of Units _____
☐ Condominium

NOTE: NEW HOME CONSTRUCTION IS NOT ELIGIBLE FOR PAYMENT FROM THIS FUND.

Description of home improvement performed/contracted by contractor: _____

_____

_____

Have you obtained a court Judgment / or Administrative Order: ☐ YES ☐ NO If you check **"NO",** you cannot apply to the fund.

Was your judgment / or Administrative Order obtained against a contractor for loss or damages sustained by reason of performance or the offering to perform home improvement in the State of Connecticut? ☐ YES ☐ NO

Date of Court Judgment / Order: / /

(This application **MUST** be received within two (2) years from this date in order to be eligible to apply)

Amount Awarded on Judgment /Order:	$
Amount Paid on Judgment / Order: **(If no Payment is received enter "0")**	$
Balance Owed on Judgment / Order:	$

To your knowledge is the judgment or order being appealed by the contractor? ☐ YES ☐ NO (If you check **"YES",** you **cannot** apply to the fund)

☐ I have directed a sheriff to execute on my judgment against the contractor. The sheriff has provided me with a return showing no personal property could be found to satisfy the judgment or that the amount found was insufficient to satisfy my judgment. See attached documentation. (Not necessary for Small Claims Judgments).

BANKRUPTCY

IF THE CONTRACTOR HAS FILED BANKRUPTCY, YOU MAY APPLY TO THIS FUND BY PROVIDING THE FOLLOWING DOCUMENTATION:

1. This application
2. A Certified Copy of the Discharge of Debtor's Notice
3. Bankruptcy Schedule in which you are listed as a creditor
4. Proof of Payment to Contractor
5. Copy of your Contract with Contractor

Please be advised you will ONLY be reimbursed the amount indicated on the Bankruptcy Schedule.

CERTIFICATION

I, _____, being duly sworn, depose and say that:
(HOMEOWNER)

1. I believe in the obligation of an oath.
2. I am at least eighteen (18) years of age.
3. This affidavit is based upon my personal knowledge.

I hereby certify that the foregoing statements are true and accurate to the best of my knowledge. In the event that I also receive moneys from any other source, such as from bankruptcy court or from the contractor, for this claim. I agree to repay the guaranty fund for any amount previously paid to me from the fund for this claim. In other words, I hereby assign all my rights, title and interest in any amount which I may recover from the guaranty fund to the Commissioner of Consumer Protection.

NOTARIZED STATEMENT

On _____, 201___, before me personally appeared _____ of

_____, Connecticut, known to me and made oath to the truth of the matters contained herein.

Signed (Applicant) _____

Subscribed and sworn to before me this _____ day of _____, 201_____

Signed: _____ Commission Expires: _____
(Comm. of Superior Court/Notary Public)

Failure to Fully complete this form may result in the denial or delay of your application