

## SALT LAKE COUNTY DECLARATION OF MUTUAL COMMITMENT

We, \_\_\_\_\_ and \_\_\_\_\_, the undersigned mutual declarants, do freely declare on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, that:

- ❖ We are solely and mutually committed to each other;
- ❖ We are eighteen years of age or older;
- ❖ We are competent to contract;
- ❖ We agree to file a termination of the mutual commitment if there is a change in the status of our relationship such that we cease to meet the criteria for mutual commitment;
- ❖ We are directly dependent upon, or interdependent with, each other, sharing a common financial obligation. Documentation demonstrating a common financial obligation includes two (2) of the following four (4) documents:
  - A joint loan obligation, mortgage, lease or joint ownership of real property or a vehicle;
  - A life insurance policy, retirement benefits account, or will or trust of one declarant designating the other declarant as beneficiary thereto, or will or trust of one declarant which designates the other declarant as executor or successor trustee;
  - A mutually granted power of attorney for purposes of healthcare or financial management;
  - Proof showing that one declarant is authorized to sign for purposes of the other declarant's bank or credit account;
- ❖ We currently share a primary residence in Salt Lake County located at:

\_\_\_\_\_  
Mailing/Street Address, City, State, Zip Code

- ❖ We meet all the criteria for mutual commitment as set forth in Chapter 2.10, Public Registries, Salt Lake County Code of Ordinances;
- ❖ We willingly execute this declaration attesting to the foregoing requirements and attesting that we are in a relationship of mutual commitment, support, and caring and that we are responsible for each other's physical and financial welfare and have the present intention to remain in that relationship.

\_\_\_\_\_  
Mutual Commitment Declarant

\_\_\_\_\_  
Mutual Commitment Declarant

State of Utah            )

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County of Salt Lake    )

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ and \_\_\_\_\_, who voluntarily signed this Declaration of Mutual Commitment.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
My Commission Expires: