

STATE OF UTAH
Department of Human Services (DHS)
CONSENT TO CONTRACT ASSIGNMENT
(Not valid unless signed by the DHS Purchasing Agent)

CONTRACT #

1. PARTIES TO THE ASSIGNMENT:

ASSIGNOR (old contractor's legal name):
 ASSIGNEE (new contractor's legal name):

ASSIGNOR'S TAX ID #:

ASSIGNEE (new contractor) Assignee please provide the following information:

Company Name				Federal Tax ID #	
Address			City	State	Zip Code
Remittance Address (if different above from address)			City	State	Zip Code
<input type="checkbox"/>	Corporation	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Proprietorship
<input type="checkbox"/>	Government				
Company Type			Company Contact Person		
Telephone Number			Fax Number		
Internet Home Page			Email Address		

2. ASSIGNEE agrees to perform all of ASSIGNOR'S contract responsibilities, and to abide by all contract provisions specified in the Contract identified above. ASSIGNOR will have no further responsibilities to perform under the Contract and will make no claim for benefits arising from the Contract as of the effective date of this Contract Assignment.

IN WITNESS WHEREOF, the parties sign and consent to this Contract Assignment effective _____.

ASSIGNOR:

ASSIGNEE:

 Signature Date

 Signature Date

 Name and Title (type or print)

 Name and Title (type or print)

APPROVED BY THE DIVISION:

APPROVED AS TO PROCUREMENT:

 Director Date
 Division of _____

 DHS Purchasing Agent Date

Agency Contact Person	Telephone Number	Email
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