

## Provide to IEDA

## **APPLICANT ASSURANCES:**

Name of Property Owner/Developer:	
Address of Project Property:	
As rightful owner(s), developer(s), and/or re	esponsible entity(s), we: (check boxes to confirm)
$\hfill \square$ Agree to the submission of this applicat	tion for the benefit of the above-named property/project.
$\square$ Agree to all terms and conditions define	ed in the IEDA program application.
$\square$ Agree to provide the specified match do	ocumented in the application.
proposed scope of work for the project I understand a representative of IEDA wi	as a reimbursement and understand that we must complete the before receiving final reimbursement of grant funds. We Il conduct an on-site final inspection of the project before approva ree to work through the local government program for
• •	EDA regarding changes in scope of work that may occur during d plans submitted in the program application.
☐ Understand that any significant deviation from IEDA may jeopardize the assistant	on/changes from the submitted proposed designs without approva
☐ Agree, if funded, to make every effort to ceremony as scheduled by IEDA.	participate, if applicable, in the formal award presentation
employee, applicant for employment, or	I rights requirements which bars discrimination against any any person participating in any sponsored program on the basis igion, sex, age, familial status, physical or mental disability.
☐ Agree to maintain safe and sanitary wo state and federal wage rates.	rking conditions and compensation for employment at applicable
Understand that IEDA reserves the right program marketing, etc.	nt to use information relevant to the project in case studies,
	ment, we certify the information presented above, and in the d correct to the best of the entity's knowledge.
Owner/Developer:	Local Government:
Type/Print Name and Title	Type/Print Name and Title
Signature:	Signature:
Date:	Date: