

(Please print on your organization letterhead)

2024 HOME Investment Partnerships Program (HOME)
Nebraska Department of Economic Development (DED)

CERTIFYING OFFICIAL/AUTHORIZED SIGNER:

To the best of my knowledge and belief, data and information in this application is true and correct, including any commitment of local or other resources. The governing body of the applicant has duly authorized this application. This applicant will comply with all Federal and state requirements governing the use of State of Nebraska HOME Program funds.

Signature in blue ink:

Typed Name and Title:

Date Signed:

Address/City/State/Zip:
