Property/Facility Name

Address

**Preparer Certification for Section F**

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| --- |
| Certification of Preparer: I certify to the best of my knowledge and belief that the information submitted in Section F of this Application is true, accurate and complete and that the Application form has not been altered, except where allowed by the form. |
|  |         /  /    LIC # Date(LEP only) |
| Signature of Preparer |
| Name:      Title:       E-mail Address:      Firm Name:      Address:      City/Town:       State:       Zip Code:      Business Phone:    -   -     Ext.:       Fax:    -   -     |