Property/Facility Name

Address

**Preparer Certification for Section F**

|  |  |
| --- | --- |
| 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:    -   - | |