



**State of Connecticut  
 Department of Emergency Services and Public Protection  
 Municipal Grant Program**



**Reimbursement Certification**

Project #: \_\_\_\_\_

I, \_\_\_\_\_ (Grantee CEO Name and Title) for the \_\_\_\_\_ (Grantee), hereby certify that construction on the project identified in the Memorandum of Understanding with the Connecticut Department of Emergency Services and Public Protection is \_\_\_\_\_ (Percentage e.g.- fifty (50%) percent) complete, which is based on the attached inspection records supplied by the municipal building inspector.

I hereby certify that the information contained in the attached Reimbursement Package is based on official accounting records, and that project outlays shown have been made in accordance with applicable grant terms and conditions, and that documentation to support these project outlays is available.

Dated this        day of        , 20\_\_ .

\_\_\_\_\_  
 (Grantee CEO Name)

\_\_\_\_\_  
 (Title)

\_\_\_\_\_  
 (Grantee)

<b><i>NOTICE: ANY FALSE STATEMENT MADE BY YOU UNDER OATH THAT YOU DO NOT BELIEVE TO BE TRUE AND WHICH IS INTENDED TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL FUNCTION MAY BE PUNISHABLE BY A FINE OR IMPRISONMENT PURSUANT TO CONNECTICUT GENERAL STATUTES SECTION 53a-157b.</i></b>
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County of \_\_\_\_\_ )  
 State of Connecticut ) , ss.

Subscribed and sworn to before me, this    day of        , 20    .

\_\_\_\_\_  
 Notary Public