APPLICATION CERTIFICATION			
I, the undersigned, acting on behalf of the Applicant named below, hereby certify and agree to the following:			
<ol> <li>The information submitted by the Applicant to DED in connection with the Project is true and correct and such information is consistent with documents provided to lenders, other government programs, or investors. The Applicant hereby authorizes DED to verify such information from any source;</li> <li>The Applicant, or any person actively engaged in the management of the Applicant:         <ul> <li>a) </li> <li>Has</li> <li>Has not committed a felony, is currently under indictment for a felony, or is currently on parole or probation for a felony conviction;</li> <li>b) </li> <li>Is not delinquent with respect to any non-protested federal, state or local taxes or fees;</li> <li>c) </li> <li>Has (or is about to) file</li> </ul> </li> </ol>			
d) O Has O Has not failed to fulfill any material obligation under any other state or federal program.			
<ul> <li>3. There are no pending or threatened liens, judgments, or material litigation against the Applicant or any person identified on the application which is likely to have a material impact on the Applicant's viability;</li> <li>4. Neither the operations of the Project itself nor the receipt of incentives for the Project would violate any existing agreement;</li> <li>5. The Applicant has obtained or is capable of obtaining all necessary federal, state and local permits and licenses for the Project;</li> <li>6. I certify that the applicant does NOT knowingly employ any person who is an unauthorized alien and that the applicant has complied with federal law (8 U.S.C. § 1324a) requiring the examination of an appropriate document or documents to verify that each individual is not an unauthorized alien;</li> <li>7. I certify that the applicant is enrolled and will participate in a federal work authorization program. J certify that the applicant is enrolled and will participate in a federal work authorization program. J certify that the applicant is enrolled and will participate in a federal work authorization program. J certify that the applicant of Economic Development documentation demonstrating applicant's participation in a federal work authorization program with respect to employees working in connection with the activities that qualify applicant for this program;</li> <li>8. I certify that the Applicant shall include in any contract it enters with a subcontractor is not knowingly in violation of section 285.530.1, RSMo, and shall not be in violation during the length of the contract. In addition the Applicant will receive a sworn affidavit from the subcontractor under the penalty of perjury, attesting that the subcontractor's employees are lawfully present in the United States. I certify that the Applicant will maintain and provide the Department of Economic Development and Department of Revenue access to documentation demonstrating compliance with this requirement;</li> <li>9. I understand that, pursuan</li></ul>			
<ol> <li>Funderstand that if the applicant is found to have employed an unauthorized anen in Missourrand did hot, for that employee, examine the document(s) required by federal law, the applicant shall be ineligible for any state-administered or subsidized tax credit, tax abatement or loan for a period of five years following any such finding;</li> <li>I attest that I have read and understand the Neighborhood Assistance Program guidelines;</li> <li>I will inform DED if, at any time before project completion, there is any change to any of the certifications made herein;</li> <li>I hereby agree to allow representatives of the Department of Economic Development (DED), Department of Revenue, or either of their designated representatives, access to the property and applicable records as may be necessary for the administration of this program; and,</li> <li>I certify under penalties of perjury that the above statements and information contained in the application and attachments are complete, true, and correct to the best of my knowledge and belief.</li> <li>I certify that I am a Corporate Officer/Member of the Applicant and have the proper authority to execute this document on behalf of the Applicant. I am authorized to make the statement of affirmation contained herein. I also realize that failure to disclose material information regarding the Applicant, any owners</li> </ol>			
or individuals engaged in the management of the Applicant, or other facts may result in criminal prosecution.			
Applicant Signature	Printed/Typed Name	Title	Date
STATE OF) SS. COUNTY OF) On thisday ofin the year 20before me,, a Notary Public in and for said state, personally			
appeared[name of Corporate Officer/ Member],, d Hotary Fubite in and for state, personally [Official Title],			
[Name of Corporation/ Agency], known to me to be the person who executed the within			
Agreement on behalf of said company and acknowledged to me that he or she executed the same for the purposes therein stated.			
Notary Public			
My commission expires			
<sup>1</sup> If more than one representative signs use a copy of this page for each signatory.			