DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT  
STATE OF CONNECTICUT  
(AN EQUAL OPPORTUNITY EMPLOYER)  
CERTIFIED RESOLUTION OF THE GOVERNING BODY  

I, ______________________, __________________, certify that below is a true and correct copy of a resolution duly adopted by _______________________ at a meeting of its _______________________ duly convened on _______________________ and which has not been rescinded or modified in any way whatsoever and is at present in full force and effect.  

_________________________ _______________________  
(Date) (Signature and Title of Official)  
SEAL  

WHEREAS, pursuant to ________________________, the Connecticut Department of Economic and Community Development is authorized to extend financial assistance for economic development projects; and WHEREAS, it is desirable and in the public interest that the _______________________ make an application to the State for $ _______________________ in order to undertake the _______________________ and to execute an Assistance Agreement.  

NOW, THEREFORE, BE IT RESOLVED BY THE  

_________________________  
(Governing Body)  

1. That it is cognizant of the conditions and prerequisites for the state financial assistance imposed by  

_________________________  
(State Statutory Reference)  

2. That the filing of an application for State financial assistance by  

_________________________  
(Applicant)  
in an amount not to exceed $ _______________________ is hereby approved and that  

Revised 07/29/09
(Title and Name of Authorized Official)

is directed to execute and file such application with the Connecticut Department of Economic and Community Development, to provide such additional information, to execute such other documents as may be required, to execute an Assistance Agreement with the State of Connecticut for State financial assistance if such an agreement is offered, to execute any amendments, decisions, and revisions thereto, and to act as the authorized representative of

(Name of Applicant)