(Town Letterhead)

## **Pre-Closeout Certification**

l,	, Chief Elected Official of the Town of (the
	icipality"), do certify as an authorized individual to the following conditions and authorize
	irtment of Housing ("DOH") to close the Small Cities Grant #SC
•	grant").
1.	The activity(describe - rehab, streets, etc) funded by this grant is
	100% complete and inspected by appropriate authorities (local, consultants,
	homeowners, etc.) for completion.
2.	All consultants, contractors, subcontractors and suppliers have been paid.
3.	There are no outstanding liens or waivers and no third party (other than the
	municipality) has right to lien the property related to this activity.
4.	The activity met a National Objective.
5.	All the grant funds administered by DOH for this activity have been expended by the
	municipality. If there are funds remaining in the account, the municipality does not
	anticipate further draw downs or payments. These funds will be returned by the
	municipality to DOH upon receipt of "Certificate of Completion" from DOH.
6.	Based on any future monitoring or audit findings, I acknowledge that the municipality
	may be responsible for repayment of ineligible project costs and such repayment does
	not relieve the municipality of future compliance requirements and the terms of the
	Assistance Agreement between the State and the municipality.
Print I	Name:
	(authorized individual)
Siane	ed: Dated