**Attachment E**

**Applicant Certification**

1. Sign either (a) or (b) below to indicate whether the Applicant Agency will or will not operate the facility and provide the services.
2. The Applicant Agency **will** operate the facility and provide the services.

*Signature*

1. The Applicant Agency **will not** operate the facility and provide the services

*Signature*

1. On behalf of the governing board or other executive authority of:

*Applicant Agency*

I affirm that the information and estimates conveyed in this application are true and accurate to the best of my knowledge. I further agree that this facility shall be used for the purpose set forth in this application for a period of thirty (30) years and that any proposed change in use shall require the approval of the State of Maryland, Board of Public Works. Finally, I shall comply with all applicable laws and regulations that govern the use of State general obligation bond funds.

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| ***Signature of Executive Director/CEO (Required)*** |  | ***Date*** |
|  |  |  |
|  |  |  |
| ***Printed Name of Executive Director/CEO (Required)*** |  |  |