## OHIO DEPARTMENT OF DEVELOPMENT BROWNFIELD REMEDIATION PROGRAM CERTIFICATE & VERIFICATION OF MATCH FUND

As a duly authorized Officer/Representat	ive of
(Applicant), I hereby certify that Applicant's budget, sub	mitted with this project, for the Ohio Department
of Development Brownfield Remediation Program ("P	rogram"), includes matching funds in the amount
equal to, or greater than, twenty-five percent (25%) of t	he total project cost, which have been committed
and/or appropriated by Applicant for this project, as rec	quired by the Program Guidelines. For this project,
the total matching fund commitment is in the amount of	of \$ and the source(s) and
amount of the matching funds provided are compliant	
Program eligible expenses incurred on or after July 4, 2	022 may be used as match.
APPLICANT:	
_	
By: Authorized Officer/Representative	
Authorized Officer/Representative	
Name:	
Title:	
Address:	
Date:	
Date.	
STATE OF OHIO )	
) SS:	
COUNTY OF SUMMIT )	
Refere me a notary public in and for said Co	ounty and State, personally appeared the above
personally known to me or had satisfactory evidence to	[Title], on behalf of the Applicant,
day of, 2024, who acknowledged that that the same is his/her/their free act and deed of	
certificate, and no oath or affirmation was administered	
, 2024.	t my hand and official seal on this day of
	Notary Public
	My commission expires: