

I/We certify that all information provided in, or attached to, this application is true and correct, and I/we authorize the City of Goose Creek and the Facade Improvement Committee to make any enquiries necessary in order to verify the accuracy of same; or to confirm that all invoices submitted hereunder have, or will, be paid. I/We agree to hold the City of Goose Creek harmless for any charges, damages, claims or liens arising out of our participation in the Facade Improvement Program. WITNESS my hand and seal this the _____ day of _____, 2019.

WITNESSES _____

Signature

APPLICANT _____

Name/Title _____

Signature