



AFFIDAVIT FORM FOR GROW WABASH COUNTY LOAN PROGRAM

CERTIFICATIONS BY BUSINESS OWNER:

Today's Date

CITIZENSHIP CERTIFICATION

Business Name

I hereby certify that at least 51% of the outstanding ownership of the company named above is comprised of those who are either citizens of the United States or reside in the United States after being legally admitted for permanent residence.

First Name

Last Name

Title

Signature

CONFLICT OF INTEREST CERTIFICATION

I hereby certify that I and all principal officers (including immediate family) hold no legal or financial interest or influence in the grantee.

Business Name

First Name

Last Name

Title

Signature

TAX STATUS CERTIFICATION

I hereby certify that I and my business are up to date on current taxes.

Signature

Date

**Email completed forms to tenille@growwabashcounty.com
or mail to Grow Wabash County at 214 S. Wabash St. Wabash, IN 46992 .**