

CONSISTENCY WITH THE CONSOLIDATED PLAN

I certify that the proposed activities included in the 2023 Emergency Solutions Grant application to the Tennessee Housing Development Agency are consistent with the jurisdiction's current, approved Consolidated Plan. (Type or clearly print the following information.)

Applicant Name: _____

Location of Project: _____

Project Name: _____

Name of the Federal Program to which the applicant is applying:

2023 Emergency Solutions Grants Program

Name of Certifying Jurisdiction: _____

Certifying Official of the Jurisdiction Name: _____

Title: _____

Signature: _____

Date: _____