

ATTACHMENT #10

**STATEMENT OF COMPLIANCE WITH AGENCY POLICIES /
CERTIFICATION OF APPLICANT**

Applicant _____ agrees, should Applicant be selected, to comply with all of HACSM’s policies, including but not limited to insurance and indemnification requirements found or referenced in this RFP.

Date: _____ Signed: _____
Name: _____
(Print)

CERTIFICATION STATEMENT:

The undersigned proposer hereby states that by completing and submitting this form he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and agrees that if the HACSM discovers that any information entered herein is false, that shall entitle HACSM, to not consider nor make award or to cancel any award with the undersigned party.

I, the undersigned, hereby certify that I have read and understand this **Request for Proposal (RFP), which requires submission of all the Attachments (#1-10) and other submittal items**, that I am authorized to submit this proposal on behalf of the Proposer, and that I guarantee complete compliance with all the terms, conditions and stipulations.

Date: _____ Signed: _____
Name: _____
(Print)

NOTE: This form will be posted along with the RFP on the Department of Housing’s website and can be downloaded and filled out electronically. The completed form however must be submitted as a hard copy PDF along with all other proposal materials as outlined in the RFP.