CDBG Beneficiary Hookup Certification Form

City/County _____
Project Number _____

Name, Address, and Survey Map Reference Number of Household	LMI Status (Yes or No)	Hooked Up (Yes or No)	Service Refused (attach signed form or other documentable reason for not hooking up household)

The households above were hooked to the public water/sewer system in compliance with all applicable ADECA policies.

_____

Mayor or Chairman Date