FLORIDA HOUSING FINANCE CORPORATION LOCAL GOVERNMENT/COMMUNITY REDEVELOPMENT AGENCY VERIFICATION THAT DEVELOPMENT IS PART OF A LOCAL COMMUNITY REVITALIZATION PLAN

Name of Development:	
the city (if located within a city) or county (if located in	e and city, and/or provide the street name, closest designated intersection and either the unincorporated area of the county). If the Development consists of Scattered ct the Scattered Site where the Development Location Point is located.)
adopted on by the ap authority to regulate the use of the subject sit Redevelopment Agency) in accordance with private sector (other than the Applicant) inve	the legal boundaries of the community redevelopment plan, pointed or elected body of the general local government with the e, or an instrumentality thereof (e.g., City, County, Community Section 163.362, F.S. The initiative/plan includes public and stment and/or involvement in the area and actions taken by the thave or will lead to broader economic investment in the area.
	CERTIFICATION
I certify that the foregoing information is true	and correct.
Signature	Print or Type Name
Name of Local Government / Community Redevelopment Agency	Print or Type Title
Name of Plan/Initiative	Date this form was signed
	pinted official (staff) responsible for such approvals, Mayor, City Manager rperson of the City Council/Commission or Chairperson of the Board of acceptable.
Please note: This form may be modified by Floric	la Housing Finance Corporation per Section 67-60.005, F.A.C.
(Form Rev. 08-2019)	