FORM APPROVED OMB
Number 1810-0790
Expiration: 01/31/2028

APPLICATION FOR IMPACT AID DISCRETIONARY CONSTRUCTION PROGRAM – SECTION 7007(b)

INDEPENDENT CERTIFICATION FOR EMERGENCY GRANTS

This form must be completed and signed by a local building inspector, a licensed architect, or a licensed engineer, and included as part of an emergency application for the discretionary construction program. The person providing this certification cannot be a member of the applicant's staff.

Name	Title	Organization
Email Address	**Phone Number**	

For the school facility named in this application, please:

1. Provide your professional and independent assessment of whether the condition is an emergency;
2. Describe how the condition adversely affects the health, safety and well-being of occupants of the school facility;
3. Describe the urgency of the need to address the condition; and
4. Provide any additional comments you believe are relevant.

If you need more space, you may provide a signed letter that includes your contact information and your signature for the applicant to upload with the application.

I certify that these statements are, to the best of my knowledge and belief, true, complete and correct.	**Signature**	**Date**