STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC SAFETY
MUNICIPAL GRANT PROGRAM

CERTIFICATE OF COMPLIANCE
DESIGN COMPLETION

Grantee: _____ **Project No:** _____

Address: _____ **Project Name:** _____
_____ (Location)
_____ **Contract For:** _____

PART "1" - Design Phase:
THIS IS TO CERTIFY THAT the local building official and local fire marshal have reviewed the plans and specifications for the above-referenced project and to the best of my knowledge, information, and belief, the above-described project has been designed in substantial compliance with requirements of the Connecticut Building Code, the Connecticut Fire Safety Code and all other applicable codes as required by law.

Notice: Any false statement made by you under oath that you do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function may be punishable by a fine or imprisonment pursuant to Connecticut General Statutes Section 53a-157b.

Grantee Chief Executive Officer: _____ _____ _____
(Typed Name) **(Signature)** **(Date)**

County of)
State of Connecticut) **, ss.**

Subscribed and sworn to before me, this day of , 20__.

_____
Notary Public
My Commission Expires:
Commissioner of the Superior Court