

CDBG QUALIFYING CRITERIA FOR BUSINESSES
For-Profit Business/Microenterprise Affidavit

MY CURRENT LEGAL NAME IS:

(Name of Signatory)

MY CURRENT LEGAL STREET ADDRESS IS:

(Legal Address Number and Street Name)

IN THE CITY OF

(Legal Address City Name)

IN THE STATE OF

(Legal Address State Name)

I HEREBY ATTEST:

- **THE STREET ADDRESS OF MY BUSINESS IS**

(Legal Address Number and Street Name)

IN THE CITY OF

(Legal Address City Name)

IN THE STATE OF

(Legal Address State Name)

OR

- **IF BUSINESS ADDRESS IS NOT IN HARTFORD, I COMMIT TO PERMANENTLY LOCATE THE BUSINESS IN THE CITY OF HARTFORD, CONNECTICUT WITHIN 90 DAYS OF THE END OF 2024–2025 FISCAL YEAR, ON OR BEFORE SEPTEMBER 28, 2025.**

- **IF FOR–PROFIT BUSINESS, THE PRIMARY CUSTOMER/BENEFICIARY OF MY BUSINESS IS THE HARTFORD LOW-MODERATE INCOME COMMUNITY.**

SIGNED:

(Signature)

PRINTED NAME:

(Printed Name)

For Notary Public Use Only Below this Line:

STATE OF

Connecticut

(State)

COUNTY OF

(County)

SS.

(Town/City)

ON THIS

(Day of Month)

DAY OF

(Month) (Year)

BEFORE ME,

(Name of notary)

THE UNDERSIGNED OFFICER, PERSONALLY APPEARED

(Name of Individual)

KNOWN TO ME (OR

SATISFACTORILY PROVEN) TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE WRITTEN INSTRUMENT AND ACKNOWLEDGED THAT HE/SHE/THEY EXECUTED THE SAME FOR THE PURPOSES THEREIN CONTAINED.

IN WITNESS WHEREOF I HEREUNTO SET MY HAND.

(Signature of Notary Public)

(Date Commission Expires)

(Printed Name of Notary)

CDBG QUALIFYING CRITERIA FOR BUSINESSES

Hartford Resident Affidavit

MY CURRENT LEGAL NAME IS:

(Name of Signatory)

MY CURRENT LEGAL STREET ADDRESS IS:

(Legal Address Number and Street Name)

IN THE CITY OF

(Legal Address City Name)

IN THE STATE OF

(Legal Address State Name)

I HEREBY ATTEST:

- I INTEND TO WORK TOWARD DEVELOPING A MICROENTERPRISE.

AND

- I INTEND TO PERMANENTLY LOCATE THE BUSINESS IN THE CITY OF HARTFORD, CONNECTICUT WITHIN 90 DAYS OF THE END OF THE 2024-2025 FISCAL YEAR, ON OR BEFORE September 28, 2025.

SIGNED:

(Signature)

PRINTED NAME:

(Printed Name)

For Notary Public Use Only Below this Line:

STATE OF

Connecticut

(State)

COUNTY OF

(County)

SS.

(Town/City)

ON THIS

(Day of Month)

DAY OF

(Month)

(Year)

BEFORE ME,

(Name of notary)

THE UNDERSIGNED OFFICER, PERSONALLY APPEARED

(Name of Individual)

KNOWN TO ME (OR

SATISFACTORILY PROVEN) TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE WRITTEN INSTRUMENT AND ACKNOWLEDGED THAT HE/SHE/THEY EXECUTED THE SAME FOR THE PURPOSES THEREIN CONTAINED.

IN WITNESS WHEREOF I HEREUNTO SET MY HAND.

(Signature of Notary Public)

(Date Commission Expires)

(Printed Name of Notary)