

Sample MSNJ District COVID-19 Recovery and Transition Grants Resolution

Whereas, the _____
(MSNJ District Management Organization)

desires to apply for a grant from the New Jersey Department of Community Affairs for

\$ _____ to carry out a project to _____
(dollar amount of grant)

(briefly describe the project)

Be it therefore RESOLVED that the _____
(MSNJ District Management Organization)

does hereby authorize the application for such grant; and, upon receipt of the grant agreement from the New Jersey Department of Community Affairs, does further authorize the execution of the grant agreement; and also, upon receipt of the fully executed agreement from the Department, does further authorize the expenditure of funds pursuant to the terms of said agreement between

(MSNJ District Management Organization)

and the New Jersey Department of Community Affairs.

Be it further RESOLVED that the persons whose names and signatures appear below are authorized to sign the application, the agreement, and any other documents in connection therewith:

(signature)

(signature)

(type or print name)

(type or print name)

(title)

(title)

CERTIFICATION:

I, _____, the Board Secretary of
(Name of Board Secretary)

(MSNJ District Management Organization)

hereby certify that at a meeting of the Board of Directors held on _____ the above
(meeting date)

RESOLUTION was duly adopted.

AFFIX CORPORATE OR NOTARY SEAL:

(Signature of Secretary of the Board of Director)