

DCNR-2014-C2P2-16	Application Information (*Indicates required information)	
Applicant Legal Name:* Hatfield Township		Web Application ID:*
Project Title:* Clemens Park MSDP		

WHEREAS, Hatfield Township

("Applicant") desires to undertake the following project

Clemens Park MSDP; and
(Project Title)

WHEREAS, the applicant desires to receive from the Department of Conservation and Natural Resources ("Department") a grant for the purpose of carrying out this project; and

WHEREAS, the application package includes a document entitled "Terms and Conditions of Grant" and a document entitled "**Grant Agreement Signature Page**"; and

WHEREAS, the applicant understands that the contents of the document entitled "Terms and Conditions of Grant," including appendices referred to therein, will become the terms and conditions of a Grant Agreement between the applicant and the Department **if the applicant is awarded a grant**; and

NOW THEREFORE, it is resolved that:

1. The "**Grant Agreement Signature Page**" may be signed on behalf of the applicant by the Official who, at the time of signing, has **TITLE** of President of the Hatfield Township Board of Commissioners.
2. If this Official signed the "**Grant Agreement Signature Page**" prior to the passage of this Resolution, this grant of authority applies retroactively to the date of signing.
3. If the applicant is awarded a grant, the "**Grant Agreement Signature Page**", signed by the above Official, will become the applicant/grantee's **executed** signature page for the Grant Agreement, and the applicant/grantee will be bound by the Grant Agreement.
4. Any amendment to the Grant Agreement may be signed on behalf of the grantee by the Official who, at the time of signing of the amendment, has the **TITLE** specified in paragraph 1 and the grantee will be bound by the amendment.

I hereby certify that this Resolution was adopted by the

Hatfield Township Board of Commissioners

(identify the governing body of the applicant, e.g. city council, borough council, board of supervisors, board of directors)

of the applicant this 25th day of March, 2015.

Secretary (Signature of the Secretary of the governing body)

DCNR USE ONLY

Project Number: _____