

## **Tourism Assistance Program (TAP)**



## **SELF CERTIFICATION**

Initial next to each statement to confirm you have thoroughly read, understood, and agree to the following: To receive a recovery grant under the Tourism Assistance Program (TAP), I agree to use the funds only for allowable costs associated with this program that have not been funded by any other grant received/awarded. Furthermore, I understand and agree to provide notice to and seek approval of GVB should any movement or transfer of funds becomes necessary. I understand that it is my responsibility to maintain records and other documents to support the use of funds I receive, as well as to document my compliance with all terms & conditions, rules & regulations and guidelines for the Tourism Assistance Program (TAP). By receiving a recovery grant, I agree to submit to an audit by any auditor of GVB's selection. I will grant the auditor access to and the right to examine and copy any records, dates or papers relevant to this subgrant until seven (7) years have passed since the final payment pursuant to this subgrant. The applicant further certifies that the information provided in this application and the information provided in all supporting documents and forms is true and accurate in all material respects. The applicant understands that any misleading or false statements or any false written or oral representation with respect to the Tourism Assistance Program (TAP), may result in the forfeiture of the grant by written notice by GVB. In such event the applicant agrees to and shall, within five (5) days following the receipt of such notice, return to GVB, an amount equal to the grant payment. The applicant agrees to pay GVB's attorney fees and actual costs incurred in the collection of grants funds. **Authorized Representative (Print Name):** Authorized Representative (Signature) :

Date :