RESOURCE VALUE DOCUMENATION FORM Legacy Land Conservation Program

I, ______ (name), do hereby swear or affirm that I am the ______ (title) of _______ (organization or governmental entity) and that I am authorized to certify that the information contained in the documents and attachments listed below is true and correct, and that the information represents the true and accurate condition of the property at the time of its acquisition by ______ (organization or governmental entity), omitting no material information.

List all documents and attachments:

I acknowledge and agree that any misrepresentation herein is a breach of the Legacy Land Conservation Program grant award, and may be actionable under Hawaii law for false statement, fraud, or other applicable offense.

Signed _____

Dated _____

STATE OF HAWAII)) SS. COUNTY OF)

On this _____ day of _____, 20___, before me personally appeared

______, to me personally known, who, being by me duly sworn or affirmed, did say that such person executed the foregoing instrument as the free act and deed of such person, and if applicable in the capacity shown, having been duly authorized to execute such instrument in such capacity.

Notary Public, State of Hawaii

My commission expires: _____

Notary Seal Affixed:

Doc. Date:	# Page	s:
Notary Name: Doc. Description:		Circuit
Notary Signature	Date	(Stamp or Seal)