

Resolution. I/ we, also understand that I /we must pay our share of the sidewalk grant before work can start.

Please sign and print name _____

Co-Owner _____

Date _____

FOR CITY USE ONLY

Staff Witness _____ Time _____ Date _____

Attached Forms _____ 1040, 1040A, or 1040EZ, receipts or misc. _____

Certification of Compliance with Shelby Income Taxes _____

Certification of Richland County Property Taxes _____

THE CITY OF SHELBY IS NOT RESPONSIBLE FOR ANY DAMAGES OR ACCIDENTS CAUSED BY THE VARIOUS CONTRACTORS.