

# Delaware Neighborhood Stabilization Program (DE NSP)

## Contractor Debarment Check

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**Name of Contractor** \_\_\_\_\_  
**(Legal)**

**Contractors Address** \_\_\_\_\_

**Date Debarment Check Completed** \_\_\_\_\_

### **CERTIFICATION SIGNATURE:**

**SIGNATURE:** By signing this Certification page, you certify that you performed the necessary actions to complete the debarment check and certifying that this contractor is not debarred or suspended.

**Grantee Name:** \_\_\_\_\_

**Program Name:** Delaware Neighborhood Stabilization Program

**Chief Elected Official or Designee:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*(Signed Certifications are to be kept in DE NSP project files)*