

TN HTF CBPP START-UP FORMS CHECKLIST

Grantee: _____

Grant Year: _____

Grant Amount: _____

___ **Form 1: Authorized Signature Form**

___ **ACH**

___ **Voided Check**

___ **W-9 Form**

___ **Signed TN-HTF CBPP Contract**

___ **Recorded Warranty Deed (showing grantee's ownership of the property)**

___ **Insurance Certificate**