## FORM OF AFFIDAVIT

State	ofOHIO	:	
		(Town) ss.	
Count	y of	:	
says t		Affiant, being duly sworn/affirmed according to law, deposes at	
1.	I am the duly autho	zed representative of [the Project].	
2.	I have personally examined and am familiar with all information contained in the foregoing Statement, including any exhibits and attachments, and that based upon mainquiry of those persons immediately responsible for obtaining the information contained in the Statement, I believe that the information is true, accurate and complete.		
3.	I am aware that there are significant penalties for submitting false information, includir the possibility of fine and imprisonment.		
The S	tatement:		
As of		continued to be in	
	(Date)	(Project)	
opera I now	tion warranting atte assign those RECs	to material corrective actions pertaining to safety and/or ntion. Further, [the Project] delivered [Quantity of REC(s)] at the Company.	
Meter	r Read Date		
		Start:	
		End:	
Sworr	and subscribed befo	e me this,	
	Month/Year		
Signat	ture of Affiant & Title		
Notar	y Signature	Print Name and Title	