

State of Michigan

Notice of Waiver of Qualified Energy Conservation Bond Allocation

Date: _____

County, Township, City or Village: _____

Address: _____

Telephone: _____ Fax: _____

Email Address: _____

Name and Title of Chief Elected Official: _____

Name of Authorized Representative (if applicable): _____

Amount of Original Allocation of **Qualified Energy Conservation Bonds**: \$ _____

Amount of Qualified Energy Conservation Bonds Waived: \$ _____

Amount of Qualified Energy Conservation Bonds Issued to Date: \$ _____

Amount of Qualified Energy Conservation Bonds Previously Waived: \$ _____

Remaining Qualified Energy Conservation Bond Allocation: \$ _____

*I hereby certify that the county/township/city/village of _____, as duly authorized by its governing body, has waived all or a portion of its qualified energy conservation bond allocation, as specified above. (**Resolution of governing body waiving volume cap allocation must be attached.**)*

Signature _____ Date _____

Chief Elected Official or Authorized Representative

Submit original signature form by U.S. Mail to:

Michigan Department of Energy, Labor and Economic Growth (DELEG)
Bureau of Energy Systems
QECB Bond Allocation Manager—Todd Hurt
611 W. Ottawa, 4th Floor
P.O. Box 30221
Lansing, Michigan 48909