

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: Housing Authority of Cochise County

Project Name: Housing Opportunities for Persons With AIDS (HOPWA)

Location of the Project: Housing Authority of Cochise County
100 Clawson Avenue P.O. Box 167
Bisbee, Arizona 85603

Name of the Federal
Program to which the
applicant is applying: FY 2011 HOPWA Permanent Supportive Housing Renewal Grant

Name of
Certifying Jurisdiction: Cochise County

Certifying Official
of the Jurisdiction
Name: Patrick G. Call

Title: Chairman, Board of Supervisors

Signature: _____

Date: _____