

FORM 1-1

AUTHORIZED SIGNATURE FORM FOR REQUEST FOR FUNDS

Updated Information

Recipient Name	Project Number
Mailing Address	Contact Person (Name & Phone #)

Requests for Funds requires (check one) ONE Signature TWO Signatures (recommended)

The signature of a municipal employee is required when a non-municipal employee is authorized to sign Requests for Funds.

Persons Authorized to Sign Request for Funds: At least one municipal employee must be authorized to request funds for the above Project Number. Chief Elected Officials cannot be authorized individuals

1.

Signature	Date
Name	Title

2.

Signature	Date
Name	Title

3.

Signature	Date
Name	Title

4.

Signature	Date
Name	Title

I certify that the signatures shown above are the legal signatures of those municipal employees authorized to sign requests for NYS CDBG funds from the Office of Community Renewal. **The Chief Elected Official may not sign this document prior to obtaining the signatures of authorized individuals.**

Signature of Chief Elected Official	Date (must be later than above dates)
Name	Title