

THIS FORMAT MUST APPEAR ON OFFICIAL LETTERHEAD*

AUTHORIZATION TO REQUEST GRANT FUNDS

CDBG CDBG-R HOME NAHTF NSP

This is to Certify that _____ and
(TYPED NAME [Mayor/Board Chairperson])

_____ are authorized to
(TYPED NAME [Clerk/Executive Director])

request Grant Funds for Grant Number(s)** _____ ;

and that the signatures appearing below are the true signatures of
the aforementioned individuals.

SIGNATURES OF AUTHORIZED OFFICIALS

Signature

Signature

Typed Name

Typed Name

Title

Title

Email

Email

Date

Date

***If official letterhead paper is not used, the signatures must be notarized.**

****Please list all active DED Grant Numbers.**