

# AUTHORIZATION TO REQUEST FUNDS

This document certifies that the individuals listed below are authorized to request program funds from the Nebraska Department of Economic Development and that the signatures appearing below are the true signatures of the aforementioned individuals.

| <b>PROGRAM</b><br>SELECT EACH PROGRAM FOR WHICH ENTITY HAS FUNDING. | <b>PROJECT/GRANT NUMBER(S)</b><br>LIST ALL PROJECT/GRANT NUMBER(S) BELOW. |
|---|---|
| <input type="checkbox"/> Community Development Block Grant          | .....   |
| <input type="checkbox"/> HOME Investment Partnerships Program       | .....   |
| <input type="checkbox"/> HOME-ARP                                   | .....   |
| <input type="checkbox"/> Middle Income Workforce Housing Fund       | .....   |
| <input type="checkbox"/> National Housing Trust Fund                | .....   |
| <input type="checkbox"/> Nebraska Affordable Housing Trust Fund     | .....   |
| <input type="checkbox"/> Pandemic Relief Housing                    | .....   |
| <input type="checkbox"/> Rural Community Recovery Program           | .....   |
| <input type="checkbox"/> Rural Workforce Housing Fund               | .....   |

THIS FORM MUST APPEAR ON OFFICIAL LETTERHEAD OR BE NOTARIZED ON THE NEXT PAGE. ALL SIGNATURES MUST BE WRITTEN IN **BLUE** INK.

|  |  |
|--|--|
| _____<br><i>SIGNATURE OF AUTHORIZED INDIVIDUAL 1</i> | _____<br><i>SIGNATURE OF AUTHORIZED INDIVIDUAL 2</i> |
| _____<br><i>PRINTED NAME</i>                         | _____<br><i>PRINTED NAME</i>                         |
| _____<br><i>TITLE</i>                                | _____<br><i>TITLE</i>                                |
| _____<br><i>EMAIL</i>                                | _____<br><i>EMAIL</i>                                |
| _____<br><i>DATE</i>                                 | _____<br><i>DATE</i>                                 |

**ACKNOWLEDGEMENT OF  
AUTHORIZATION TO REQUEST FUNDS**

REQUIRED ONLY IF PAGE ONE DOES NOT APPEAR ON OFFICIAL LETTERHEAD.

STATE OF NEBRASKA )  
 ) S.S.  
COUNTY OF \_\_\_\_\_ )

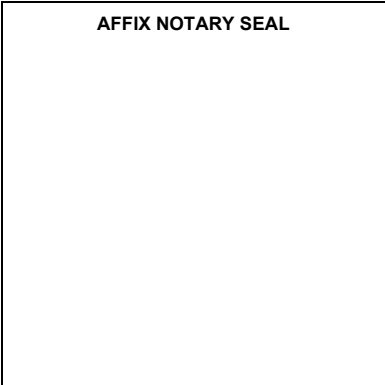
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The foregoing Authorization to Request Funds document was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by (name/title) \_\_\_\_\_ and (name/title) \_\_\_\_\_ of (awardee/recipient/subrecipient)\_\_\_\_\_.

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NOTARY SIGNATURE



# INSTRUCTIONS TO COMPLETE AUTHORIZATION TO REQUEST FUNDS

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## General Instructions

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- The Authorization to Request Funds form identifies two individuals who are authorized to request program funding on behalf of the awarded entity.
- The Authorization to Request Funds form on page one of this document must be completed prior to receiving funds related to any awarded program. Completion of this form is required for each new award.
- If the form appears on official letterhead, Acknowledgement by a Notary Public on page two is not required.
- If official letterhead is not used, Acknowledgement by a Notary Public on page two of this document must be submitted with the Authorization to Request Funds form on page one.
- The Authorization to Request Funds form will remain on file with the Department of Economic Development and will be valid for the duration of the award term or until an updated form is submitted. In the event of a change to the Authorized Individuals, the awarded entity must submit a new form. Do not delete previous versions of the Authorization to Request Funds form from the grant management system.

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## Instructions to complete Authorization to Request Funds form

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- At the top of page, check the box corresponding to each program for which the entity has current funding. In the column to the right of the program name, provide the project number(s) or grant number(s) for each program, as applicable. Refer to the program contract or agreement to locate this information.
- Two (2) Authorized Individuals must sign this form in **blue** ink and provide their title and contact information.
- Authorized Individual 1 may be: Mayor, Board Chair, Owner, or General Partner, as applicable.
- Authorized Individual 2 may be: Clerk, Executive Director, Owner, or General Partner, as applicable.
- Authorized Individuals may not be third-party administrators.