



Authorized Agent

AS THE _____
(Chief Executive Officer / Director / President / Secretary)

OF THE _____
(Name of County/City Organization)

I hereby authorize the following individual(s) to execute for and on behalf of the named Regional Entity/Transit Operator, any actions necessary for the purpose of obtaining Low Carbon Transit Operations Program (LCTOP) funds provided by the California Department of Transportation, Division of Rail and Mass Transportation. This form is valid for Fiscal Year 2014-2015 funds. If there is a change in the authorized agent, the project sponsor must submit a new form. This form is required even when the authorized agent is the executive authority himself. I understand the Board must provide a resolution approving the Authorized Agent. The Board Resolution appointing the Authorized Agent is attached.

(Name and Title of Authorized Agent) OR

(Name and Title of Authorized Agent) OR

_____ .
(Name and Title of Authorized Agent)

_____ (Print Name) _____ (Title)

(Signature)

Approved this _____ day of _____, 20_____

Attachment: Board Resolution approving Authorized Agent