

RESOLUTION

BE IT RESOLVED, by authority of the _____
(Name of Municipality/Authority)

of _____
(Name of Municipality if Authority)

_____, County, and it is hereby

resolved by authority of the same, that the _____
(designate official title)

of said Municipality/Authority be authorized and directed to sign the attached Agreement

on its behalf and that the _____ be authorized and
(designate official title)

directed to attest the same.

ATTEST:

(Name of Municipality/Authority)

BY _____

Signature and Official Title

Signature and Official Title

(SEAL)

I, _____ , _____
(Name) (Official Title)

of the _____
(Name of Governing Body and Municipality)

do hereby certify that the foregoing is a true and correct copy of the Resolution adopted

at a regular meeting of the _____
(Name of Governing Body)

held the _____ day of _____ , 20 _____ .

Date: _____ , 20 _____

(Signature and Official Title)