AUTHORIZED SIGNATURE FORM FOR REQUEST FOR FUNDS

Recipient Name					
CDBG Project #					
Contact Person				Title	
Phone		e-mail			
New Submission	Yes □ No □	Updated	□	Date of initial submission	

Request for Funds requires two signatures

All signatures are required to be municipal employees, non-municipal employees cannot be authorized to sign Request for Funds

Persons Authorized to Sign Request for Funds Forms 1-4, 1-5 and 1-6 cannot also sign any check related to the disbursement of NYS CDBG funds

Chief Elected Official and non-municipal employees, Subrecipients and Consultants cannot be authorized signatories on this form

1	**Signature**		**Date**	
	Typed Name		**Title**	
	By signing this, I acknowledge that I am not authorized to sign CDBG checks			
2	**Signature**		**Date**	
	Typed Name		**Title**	
	By signing this, I acknowledge that I am not authorized to sign CDBG checks			
3	**Signature**		**Date**	
	Typed Name		**Title**	
	By signing this, I acknowledge that I am not authorized to sign CDBG checks			
4	**Signature**		**Date**	
	Typed Name		**Title**	
	By signing this, I acknowledge that I am not authorized to sign CDBG checks			

I certify that the signature(s) shown above are the legal signatures of those municipal employees authorized to sign requests for 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 at least one day later than above dates)**

_____ ____ _____

Name — Title

INSTRUCTIONS

Complete the Authorized Signature Form as instructed.

Chief Elected Official's (CEO's) and non-municipal employees, Subrecipients and Consultants cannot be an authorized signatory for Request for Funds and therefore, cannot be listed as an authorized person on the form.

Effective December 1, 2017, two signatures are required for all projects.

This form is required to request the electronic transfer of CDBG funds into a Recipient's CDBG non-interest bearing checking account. The form is to be submitted with the signed grant agreement unless the Form is an update to a previously submitted Form. Retain a copy for your files.

The original form, with ALL original signatures on one document, must be submitted to OCR, a copy of the form must be retained with local project files.

Recipient Name – Enter the official Name of the Recipient. This is the County, City, Town or Village that has been awarded CDBG funds.

Project Number – Enter the OCR assigned Project number. *An Authorized Signature Form for Request for Funds Form must be submitted for each project funded by OCR*.

Contact Person – Enter the name, title, telephone number and e-mail of the person OCR should contact if there are any questions with the form. ***This must be a municipal employee and should be the person completing the form.***

New Submission or Updated Form - Check the appropriate box if the form is new or an update to a previously submitted form. Please provide the date of the original submission.

Persons Authorized to Sign Request for Funds: Enter the name, title, date and signature of the persons authorized to sign the Request for Funds Form for CDBG funds. It is suggested that a minimum of four persons be designated to assure availability of personnel.

The person(s) authorized to sign for Request for Funds cannot also be responsible for signing a check for the disbursement of CDBG funds.

Signature of Chief Elected Official – Enter the name and title of the Chief Elected Official. The Chief Elected Official must sign and date the Form after the Form has been completed and all authorized persons have been listed.

To demonstrate separation of duties, the person responsible for preparing the Request for Funds Form as indicated on 1-4A, 1-5A or 1-6A, should not be the same person(s) authorized to sign the Request for Funds Form 1-4, 1-5 or 1-6.