



## BROWARD COUNTY - MOBILITY ADVANCEMENT PROGRAM AUTHORIZED MUNICIPAL SIGNATORIES & DESIGNATION FORM

Municipal Surtax Project ID: \_\_\_\_\_

Per Article 5, Section 5.2, of the Surtax Project Funding Agreement (PFA) between County and \_\_\_\_\_ the following individuals are authorized to sign and certify Advance Payment Requests and Surtax Expense Summaries on behalf of the Municipality.

\_\_\_\_\_  
Chief Administrative Officer Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Chief Financial Officer/Finance Director Printed Name

\_\_\_\_\_  
Signature

### Project Manager

The Project Manager for the above-referenced project, responsible for submitting reports and deliverables as defined by surtax guidance, is:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

### Designated Persons

*(Only complete this section if additional persons will be designated as authorized signatories)*

By signing this form, I \_\_\_\_\_, designate the person(s) below with authority to submit payment applications/Expense Summaries, and financial reports as required by the PFA and consistent with surtax guidance.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
City Manager's Signature

\_\_\_\_\_  
Date

**Please submit an updated form to your MAP Admin contract manager if there are changes to the authorized signatories**