

**APPOINTMENT OF AUTHORIZED REPRESENTATIVE**

Project No. \_\_\_\_\_

The \_\_\_\_\_, as legislative body of the applicant, hereby authorizes \_\_\_\_\_ to act as the authorized representative of the applicant for the purpose of furnishing to the State of Vermont such information, data and documents pertaining to the above noted project as may be required and otherwise to act as the authorized representative of the applicant in connection with the project.

Correspondence should be sent to the authorized representative at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Phone Number                      Fax Number

\_\_\_\_\_  
Email Address

Done this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

BY: \_\_\_\_\_  
(Name of Municipality)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(All or a majority of its legislative body)