PNP APPLICANT'S AUTHORIZED AGENT RESOLUTION

BE IT RESOLVED BY THE ____________________________ OF THE ______________________________________
(PNP Governing Body) (Name of the PNP Applicant)

THAT
________________________________________________, OR
(Title of PNP Authorized Agent)
___________________________________________________________, OR
(Title of PNP Authorized Agent)
________________________________________________
(Title of PNP Authorized Agent)

is hereby authorized to execute for and in behalf of the _______________________________________, a PNP organization as defined in California Government Code Section 8692, this application and to file it with the California Emergency Management Agency (Cal EMA) for the purpose of obtaining certain state financial assistance under the California Disaster Assistance Act.

THAT the ________________________________, a PNP organization established under the laws of the State of California, hereby authorizes its agent(s) to provide to the Cal EMA for all matters pertaining to such state disaster assistance the assurances and agreements required.

Passed and approved this __________ day of ___________________, 20_____

______________________________________________________
(Name and Title)
_______________________________________________________
(Name and Title)
______________________________________________________
(Name and Title)

CERTIFICATION

I, _______________________________________, duly appointed and ________________________________ of
(Name) (Title)
________________________________________________, do hereby certify that the above is a true and correct copy of a
Resolution passed and approved by the ____________________________ of the ____________________________ on the
(PNP Governing body) (Name of the PNP Applicant)
__________________ day of ___________________, 20_____.

Date: _________________________

___________________________________________
(Official Position)
___________________________________________
(Signature)