

FY 2020-2021 LCTOP

## **Authorized Agent**

AS THE Executive Director

(Chief Executive Officer/Director/President/Secretary)

## **OF THE** Sacramento Area Council of Governments

(Name of County/City/Transit Organization)

I hereby authorize the following individual(s) to execute for and on behalf of the named Regional Entity/Transit Operator, any actions necessary for the purpose of obtaining Low Carbon Transit Operations Program (LCTOP) funds provided by the California Department of Transportation, Division of Rail and Mass Transportation. I understand that if there is a change in the authorized agent, the project sponsor must submit a new form. This form is required even when the authorized agent is the executive authority himself. I understand the Board must provide a resolution approving the Authorized Agent. The Board Resolution appointing the Authorized Agent is attached.

Click here to enter	r text.			OR
(Name and Title of Authorize	ed Agent)			
Click here to enter				OR
(Name and Title of Authorize	ed Agent)			
Click here to enter text.				OR
(Name and Title of Authorize	ed Agent)			
Click here to enter text.				OR
(Name and Title of Authorize	ed Agent)			
James Corless			Executive Director	
(Print Name)			(Title)	
			_	
(Signature)				
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Approved this	15	day of	April	, 2021

