

Division of Mass Transportation
Public Transportation Modernization, Improvement, and
Service Enhancement Account (PTMISEA)
Authorized Agent Form



Authorized Agent

AS THE _____
(Chief Executive Officer / Director / President / Secretary)

OF THE _____
(Name of County/City 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 Public Transportation Modernization, Improvement, and Service Enhancement Account (PTMISEA) funds provided by the California Department of Transportation, Division of Mass Transportation. This form is valid at the beginning of Fiscal Year 2010-2011 until the end of the PTMISEA Program. 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.

(Name and Title of Authorized Agent) OR

(Name and Title of Authorized Agent) OR

(Name and Title of Authorized Agent)

(Print Name) (Title)

(Signature)

Approved this _____ day of _____, 20_____