

**California Public Utilities Commission
Local Agency Technical Assistance Program**

**CONSENT FORM
Acknowledgement and Acceptance of Terms**

Applicant Name: County of Santa Barbara

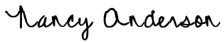
Key Project Contact: Jasmine McGinty, Principal Analyst County Executive Office

The Grantee identified above acknowledges receipt of the California Public Utilities Commission Resolution T-17785 or Award Letter Dated May 1, 2023 and agrees to comply with all grant terms, conditions, and requirements set forth in the Resolution or Approval Letter including those in the Local Agency Technical Assistance Rules.

Undersigned representative of County of Santa Barbara [Name of Grantee] is duly authorized to execute this Consent Form on behalf of the Grantee and to bind the Grantee to the terms, conditions, and requirements set forth in California Public Utilities Commission Resolution T-17785 or Award Letter.

Dated this _____ day of _____, 2023.
5/10/2023 | 9:52 AM PDT

Signature of Local Agency/Tribe:

DocuSigned by:

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Title: Chief Assistant County Executive Officer

Printed Name: Nancy Anderson

Organization or Name of Local Agency or Tribe: County of Santa Barbara

Business Address (include street address, suite/apt. number, city, state, and ZIP Code):

105 East Anapamu, Suite 406 Santa Barbara, CA 93101

Telephone Number: 805-448-4028

Email Address: jmcginty@countyofsb.org