



**BIDS & PROCUREMENT**

Tel: (269) 965-7766

Fax: (269) 441-2433

PO Box 1026

Battle Creek, MI 49016

**Homeowner Rehabilitation Programs – Signature Authorizations**

Name of Company: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_

The following individuals are authorized to sign any and all documents required to facilitate projects through any of the housing programs that Community Action administers, including: proposals; contracts; change orders; payment draw requests; final payment requests; final invoices; release of liens; and warranties.

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Print Name	Title	Signature
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Print Name	Title	Signature
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Print Name	Title	Signature
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Print Name	Title	Signature
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Owner's Name Printed	Owner's Signature
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Project Specialist Signature	Date
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