

ERIE COUNTY WATER AUTHORITY
AUTHORIZATION FORM
For Approval/Execution of Board Meeting Documents

Document Name: _____ Project No.: _____

Description: _____

Item Description:

Choose one: _____

Other: _____

Action Requested:

Choose one: _____

Other: _____

Approvals Required:

APPROVED AS TO CONTENT:

Chief Financial Officer

Date: 02/02/2026

Chief Operating Officer

Date: 02/02/2026

Claims Rep. – Risk Manager

Date: 2/2/2026

Comptroller

Date: _____

Director of Administration

Date: 02/02/2026

Director of Distribution

Date: 2/2/2026

Director of Human Resources

Date: _____

Director of IT

Date: _____

Director of Operations

Date: _____

Director of Planning & Water Supply

Date: _____

Director of Production

Date: _____

Director of Water Quality

Date: _____

Executive Engineer

Date: 2/2/2026

General Counsel (Legal)

Date: 2/2/2026

Other: _____

Date: _____

APPROVED FOR BOARD RESOLUTION:

Secretary to the Authority

John H. Hilt

Date: 2/3/2026

Remarks: _____

Resolution Date: _____ Item No: _____