

ERIE COUNTY WATER AUTHORITY  
AUTHORIZATION FORM  
For Approval/Execution of Documents  
(check which apply)

**Contract:** \_\_\_\_\_ **Project No.:** List 2019-19  
**Project Description:** Master Purchase Order releases, Purchase Orders, and Amendments & Master Purchase Order amendments

**Item Description:**

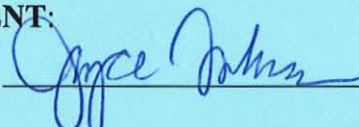
- |   |  |   |                                       |
|---|--|---|---------------------------------------|
| <input type="checkbox"/> Agreement  | <input type="checkbox"/> Professional Service Contract | <input type="checkbox"/> Amendment          | <input type="checkbox"/> Change Order |
| <input type="checkbox"/> BCD  | <input type="checkbox"/> NYSDOT Agreement              | <input type="checkbox"/> Contract Documents | <input type="checkbox"/> Addendum     |
| <input type="checkbox"/> Recommendation for Award of Contract                 | <input type="checkbox"/> Recommendation to Reject Bids |   |                                       |
| <input type="checkbox"/> Request for Proposals                                |  |   |                                       |
| <input checked="" type="checkbox"/> Other <u>Approve MPO releases and POs</u> |  |   |                                       |

**Action Requested:**

- |   |  |
|---|--|
| <input type="checkbox"/> Board Authorization to Execute                       | <input type="checkbox"/> Legal Approval                              |
| <input type="checkbox"/> Board Authorization to Award                         | <input type="checkbox"/> Execution by the Chairman                   |
| <input type="checkbox"/> Board Authorization to Advertise for Bids            | <input type="checkbox"/> Execution by the Secretary to the Authority |
| <input type="checkbox"/> Board Authorization to Solicit Request for Proposals |  |
| <input checked="" type="checkbox"/> Other <u>Approve purchases</u>            |  |

**Approvals Needed:**


**APPROVED AS TO CONTENT:**

- |   |   |                        |
|---|---|------------------------|
| <input checked="" type="checkbox"/> Department Head |  | Date: <u>10/9/2019</u> |
| <input type="checkbox"/> Risk Manager               | _____   | Date: _____            |
| <input type="checkbox"/> Director of Administration | _____   | Date: _____            |
| <input type="checkbox"/> Executive Engineer         | _____   | Date: _____            |

**APPROVED AS TO FORM:**

- |                                |       |             |
|--------------------------------|-------|-------------|
| <input type="checkbox"/> Legal | _____ | Date: _____ |
|--------------------------------|-------|-------------|

**APPROVED FOR BOARD RESOLUTION:**

- |  |  |                      |
|--|--|----------------------|
| <input checked="" type="checkbox"/> Secretary to the Authority |  | Date: <u>10/9/19</u> |
|--|--|----------------------|

**Remarks:** \_\_\_\_\_

**Resolution Date:** \_\_\_\_\_

**Item No:** \_\_\_\_\_