

**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



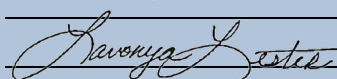
Date: 01/29/2026

Claims Rep. – Risk Manager



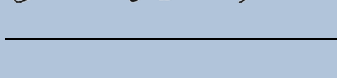
Date: 1/28/2026

Comptroller



Date: \_\_\_\_\_

Director of Administration



Date: 01/28/2026

Director of Distribution



Date: \_\_\_\_\_

Director of Human Resources



Date: \_\_\_\_\_

Director of IT



Date: \_\_\_\_\_

Director of Operations



Date: \_\_\_\_\_

Director of Planning & Water Supply



Date: \_\_\_\_\_

Director of Production



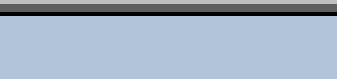
Date: 1/28/2026

Director of Water Quality



Date: \_\_\_\_\_

Executive Engineer



Date: 1/29/2026

General Counsel (Legal)



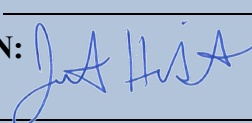
Date: 2/2/2026

Other: \_\_\_\_\_

Date: \_\_\_\_\_

**APPROVED FOR BOARD RESOLUTION:**

Secretary to the Authority



Date: 2/2/26

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

Resolution Date: \_\_\_\_\_ Item No: \_\_\_\_\_