



TOWN OF JEROME

POST OFFICE BOX 335, JEROME, ARIZONA 86331
(928) 634-7943 www.jerome.az.gov

RESOLUTION NO. 649

A RESOLUTION OF THE MAYOR AND TOWN COUNCIL OF THE TOWN OF JEROME, ARIZONA, APPROVING THE DESIGNATION OF APPLICANT'S AUTHORIZED REPRESENTATIVE AND ALTERNATE AUTHORIZED REPRESENTATIVE FORMS SUBMISSION TO THE ARIZONA DEPARTMENT OF EMERGENCY AND MILITARY AFFAIRS, WHICH DESIGNATES THE CITY'S REPRESENTATIVES FOR APPLYING FOR CERTAIN PUBLIC ASSISTANCE; AND AUTHORIZING THE APPLICANT'S AUTHORIZED REPRESENTATIVES TO EXECUTE AND DELIVER SAID APPLICATION ON BEHALF OF THE TOWN OF JEROME

BE IT RESOLVED by the Mayor and Town Council of the Town of Jerome, Arizona, as follows:

Section 1. The Designation of Authorized Representative's form to the Arizona Department of Emergency and Military Affairs, which designates BRETT KLEIN, the Town Manager of the Town of Jerome, and MARTY BOLAND, the Director of Public Works, as Authorized Representative and Alternate Authorized Representative, respectively, to execute applications on behalf of the Town of Jerome for the purpose of obtaining financial assistance under the Disaster Relief Act, is hereby approved in the form attached hereto.

Section 2. BRETT KLEIN, the TOWN MANAGER, and MARTY BOLAND, the DIRECTOR OF PUBLIC WORKS, are hereby authorized and directed to take all steps necessary to carry out the purpose and intent of this Resolution.

PASSED AND ADPOTED by the Mayor and Town Council of the Town of Jerome, Arizona, this 20th Day of February, 2023.

Approved:



Mayor

Attest:

Approved as to Form:





Brett Klein, Town Manager / Clerk

William Sims, Town Attorney

**ARIZONA DEPARTMENT OF EMERGENCY AND MILITARY AFFAIRS
DESIGNATION OF APPLICANT'S AUTHORIZED REPRESENTATIVE FORM**

The intent of this DESIGNATION is to appoint an APPLICANT'S AUTHORIZED REPRESENTATIVE for the following:

Select program(s) Public Assistance HMA Mitigation Program SEC Mitigation
Select duration Until further notice Only Event _____ From _____ to _____

Applicant: Town of Jerome

CERTIFICATION

I, Christina Barber, duly appointed and Mayor of
(Authorizing Official's Name) (Title)

Town of Jerome, do hereby certify that the information below is true and correct,
(Applicant)

based on a resolution passed and approved (**attached**) by the Town Council
(Governing Body)

of Town of Jerome on the 20th day of February, 2023.
(Applicant) (day) (month) (year)

Brett Klein has been designated as the Applicant's Authorized Representative
(Name of Designated Applicant's Authorized Representative)

to act on behalf of Town of Jerome.
(Applicant)

 Mayor 2/20/2023
(Authorizing Official's Signature) (Title) (Date)

This document MUST be accompanied by a copy of the Resolution or Meeting Minutes by your governing board which designated the Applicant's Authorized Representative.

Designated Applicant's Authorized Representative

Name Brett Klein

Title/Official Position Town Manager

Full Mailing Address P.O. Box 335, Jerome, AZ 86331

Email Address b.klein@jerome.az.gov

Daytime Telephone Number 928-634-7943 Cell 515-478-4553
(Please include area code and extension if not a direct number)

For DEMA Use Only

Received By: _____
(Initials & Date)

January 2023

Form #AZ PA 204-4

**ARIZONA DEPARTMENT OF EMERGENCY AND MILITARY AFFAIRS
DESIGNATION OF ALTERNATE APPLICANT'S AUTHORIZED REPRESENTATIVE FORM**

The intent of this DESIGNATION is to appoint an ALTERNATE APPLICANT'S AUTHORIZED REPRESENTATIVE for the following:

Select program(s) Public Assistance HMA Mitigation Program SEC Mitigation

Select duration Until further notice Only Event _____ From _____ to _____

Applicant: Town of Jerome

CERTIFICATION

I, Christina Barber, duly appointed and Mayor of
(Authorizing Official's Name) (Title)

Town of Jerome, do hereby certify that the information below is true and correct,
(Applicant)

based on a resolution passed and approved (**attached**) by the Town Council
(Governing Body)

of Town of Jerome on the 20th day of February, 2023.
(Applicant) (day) (month) (year)

Marty Boland has been designated as the Alternate Applicant's Authorized
(Name of Designated Alternate Applicant's Authorized Representative)

Representative to act on behalf of Town of Jerome.
(Applicant)

 Mayor 2/20/2023
(Authorizing Official's Signature) (Title) (Date)

This document MUST be accompanied by a copy of the Resolution or Meeting Minutes by your governing board which designated the Alternate Applicant's Authorized Representative.

Designated Alternate Applicant's Authorized Representative

Name Marty Boland

Title/Official Position Director of Public Works

Full Mailing Address P.O. Box 335, Jerome, AZ 86331

Email Address m.boland@jerome.az.gov

Daytime Telephone Number 928-634-7943 Cell 928-634-7943
(Please include area code and extension if not a direct number)

For DEMA Use Only

Received By: _____ January 2023 Form #AZ PA 204-4
(Initials & Date)