RESOLUTION

WHEREAS the Lincoln Parish Waterworks District (Mt. Olive Waterworks District), whose PWS ID is LA1061014; is a component unit of the Lincoln Parish Police Jury, and is in need of improvements to the Water System and

WHEREAS loans for this project may be available through the Drinking Water Revolving Loan Fund program operated by the Louisiana Department of Health Office of Public Health.

NOW, THEREFORE, BE IT RESOLVED, by the Lincoln Parish Police Jury that:

Section 1. The President of the Lincoln Parish Police Jury is hereby authorized to submit a Loan Application Form 100A and accompanying documents to the Department of Health on behalf of the Lincoln Parish Police Jury for the purpose of placing this project on the Comprehensive Priority List for funding through the Drinking Water Revolving Loan Fund program; and,

Section 2. The President of the Lincoln Parish Police Jury is further authorized to furnish such additional information as may reasonably be requested in connection with the Loan Application; and,

Section 3. The President of the Lincoln Parish Police Jury is hereby designated as the Official Project Representative and is hereby given signature authority for all relative documents for the Lincoln Parish Police Jury for any project that may result from the submission of the Loan Application Form 100A and accompanying documents. Furthermore, the President of the Lincoln Parish Police Jury representing Lincoln Parish is hereby given the power and authority to do all things necessary to implement, maintain, amend, and renew such documents relative to any such project.

A MOTION TO ADOPT the above resolution was made by_____(Name)_____, seconded by (Name)____, and resulted in the following vote:

YEAS _____
NAYS _____
ABSENT _____
ABSTAINING _____

CERTIFICATE

We the undersigned do certify that the foregoing resolution is a true and correct copy of a resolution adopted at a meeting held on the _____day of _____, 20____, at which meeting a quorum was present and voting.

_____

Presiding official

ATTEST:

_____

Name & Title (Secretary/Clerk)