



Oklahoma Office of
Homeland Security
Prevent, Protect, Prepare

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SIGNATURE AUTHORIZATION

Required to sign all OKOHS subgrant documents

PROJECT CONTACT/SECONDARY AUTHORIZED OFFICIAL INFORMATION

PRINT Name Darrel Pyle		
Title City Manager		
Agency City of Norman, OK		
Mailing Address 201 West Gray Street		State OK
		Zip 73070
Phone # 405-366-5401	Fax #	Email Darrel.Pyle@NormanOK.Gov

Primary Contact Signature _____

Date _____

OPTIONAL Secondary Contact

Authorized to sign subgrant documents? ☒ Yes ☐ No
(If "yes," please sign below)

PRINT Name Darrel Pyle	Title / Agency City of Norman, OK
Email Darrel.Pyle@NormanOK.Gov	Phone # 405-366-5401

Secondary Contact Signature _____

Date _____

AGENCY/JURISDICTION CHIEF EXECUTIVE OFFICER – PRIMARY AUTHORIZED OFFICIAL INFORMATION

City or County Official (Mayor, City Manager, County Commissioner)

I hereby authorize the individual(s) identified above to act on my behalf in coordination with the Oklahoma Office of Homeland Security (OKOHS) and to sign all documentation related to this subgrant.

PRINT Chief Executive Officer Name Stephen Tyler Holman	OKOHS Award #	
Title Mayor	Phone # 405-366-5403	
Jurisdiction (City, County, etc.) Norman, Cleveland County	Email Stephen.Holman@NormanOK.Gov	
Mailing Address 201 West Gray Street	State OK	Zip 73070

Chief Executive Officer Signature _____

Date _____

Form Revised as of: September 10, 2007

*If any of the above information changes please submit a new **SIGNATURE AUTHORIZATION FORM** to OKOHS immediately.*