RESOLUTION DESIGNATION OF APPLICANT'S AGENT North Carolina Division of Emergency Management

Organization Name (hereafter named Organization) County of Burke	Disaster Number:
Applicant's State Cognizant Agency for Single Audit purposes (I	f Cognizant Agency is not assigned, please indicate):
Applicant's Fiscal Year (FY) Start 2023 Month: J	uly Day: 1
Applicant's Federal Employer's Identification Number 56 - 6000280	
Applicant's Federal Information Processing Standards (FIPS) Number 3 - 702 - 3	
PRIMARY AGENT	SECONDARY AGENT
Agent's Name Brian Epley	Agent's Name Margaret Pierce
Organization Burke County	Organization Burke County
Official Position County Manger	Official Position Deputy County Manager/Finance Director
Mailing Address PO Box 219 ■	Mailing Address PO Box 219
City ,State, Zip Morganton, NC 28680	City ,State, Zip Morganton, NC 28680
Daytime Telephone (828) 764-9350	Daytime Telephone (828) 764-9051
Facsimile Number	Facsimile Number
Pager or Cellular Number	Pager or Cellular Number
BE IT RESOLVED BY the governing body of the Organization (a public entity duly organized under the laws of the State of North Carolina) that the above-named Primary and Secondary Agents are hereby authorized to execute and file applications for federal and/or state assistance on behalf of the Organization for the purpose of obtaining certain state and federal financial assistance under the Robert T. Stafford Disaster Relief & Emergency Assistance Act, (Public Law 93-288 as amended) or as otherwise available. BE IT FURTHER RESOLVED that the above-named agents are authorized to represent and act for the Organization in all dealings with the State of North Carolina and the Federal Emergency Management Agency for all matters pertaining to such disaster assistance required by the grant agreements and the assurances printed on the reverse side hereof. BE IT FINALLY RESOLVED THAT the above-named agents are authorized to act severally. PASSED AND APPROVED this October day of 23 , 20 23	
GOVERNING BODY	CERTIFYING OFFICIAL
Name and Title Brian Epley, County Manager	Name Jessica Whitesides
Name and Title Scott Mulwee, Chairman of the Board	Official Position Sr. Fiscal Analyst
Name and Title	Daytime Telephone (828) 764-9059
CERTIFICATION I,	
Rev. 06/02	