## RESOLUTION DESIGNATION OF APPLICANT'S AGENT

North Carolina Division of Emergency Management

Organization Name (hereafter named Organization)  City of Fayetteville	Disaster Number:
Applicant's State Cognizant Agency for Single Audit purposes (If Cognizant Agency is not assigned, please indicate):	
Federal Transit Administration  Applicant's Fiscal Year (FY) Start	
2023 Month: October Day: 3rd  Applicant's Federal Employer's Identification Number	
56 - 6000122	
Applicant's Federal Information Processing Standards (FIPS) Number	
PRIMARY AGENT	SECONDARY AGENT
Agent's Name Douglas J. Hewett	Agent's Name Jody Picarella
Organization City of Fayetteville	Organization City of Fayetteville
Official Position City Manager	Official Position Chief Financial Officer
Mailing Address 433 Hay Street	Mailing Address 433 Hay Street  ■
City ,State, Zip Fayetteville, NC 28301	City ,State, Zip Fayetteville, NC 28301
Daytime Telephone (910) 433-1990	Daytime Telephone (910) 433-1682
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	
GOVERNING BODY	CERTIFYING OFFICIAL
Name and Title City of Fayetteville City Council	Name Mitch Covin
Name and Title	Official Position Mayor
Name and Title October 3, 2023	Daytime Telephone (910) 433-1990
CERTIFICATION	
I, Pamela Megill , (Name) duly appointed and City Clerk (Title)	
of the Governing Body, do hereby certify that the above is a true and correct copy of a resolution passed and approved by the Governing Body of City of Fayetteville (Organization) on the 3rd day of	
October, $20\underline{23}$ .	
	Signature: Taxela Megill
Rev. 06/02	