

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT  
 DIVISION OF FINANCIAL ASSISTANCE  
 EMERGENCY SOLUTIONS GRANT PROGRAM (Rev 4/18)  
 2020 West El Camino Ave, 4th Floor  
 Sacramento, CA 95833  
 Phone: (916) 263-2771  
 Fax: (916) 263-3391



## EMERGENCY SOLUTIONS GRANT PROGRAM Authorized Signatories Identity Form

**DATE:** 02/27/2023

### GRANTEE INFORMATION

**Name:** County of San Bernardino, CDH Department

**Contract Number:** 20-ESGCV1-00038 Amd 2

### FORM INSTRUCTIONS

In the space provided below list the name, position/title and signature of all the individual who are authorized to sign in lieu of the authorized representative.

Name of Signer	Position/Title	Signature
Diana Atkeson	Deputy Executive Officer	<i>Diana Atkeson</i>

**Note:**

If the information provided below changes, update this form and send it to your HCD representative along with a copy of the meeting notes or some other official documentation evidencing the change in persons occupying the authorized position/title. The additional documentation evidencing the name, signature and position/title of authorized signatories need not be ESG specific, but may provide general authority evidencing the name and position/title of individuals authorized to legally bind the governing body.

### CERTIFICATION

I certify that the signatures above are of the individuals authorized to request payment of funds under the grant cited above.

*\* Note: Cannot be a person named above*

Leonard X. Hernandez

Chief Executive Officer

**Name of Authorized Representative**

**Title**

*Leonard X. Hernandez*

2/27/2023

**Signature of Authorized Representative**

**Date**



## County of San Bernardino DELEGATED AUTHORITY – DOCUMENT REVIEW FORM

This form is for use by any department or other entity that has been authorized by Board of Supervisors/Directors action to execute grant applications, awards, amendments or other agreements on their behalf. All documents to be executed under such delegated authority must be routed for County Counsel and County Administrative Office review prior to signature by designee.

**Note: This process should NOT be used to execute documents under a master agreement or template, or for construction contract change orders. Contact your County Counsel for instructions related to review of these documents.**

Complete and submit this form, along with required documents proposed for signature, via email to the department's County Counsel representative and Finance Analyst. If the documents proposed for signature are within the delegated authority, the department will submit the requisite hard copies for signature to the County Counsel representative. Once County Counsel has signed, the department will submit the signed documents in hard copy, as well as by email, to CAO Special Projects Team for review. If approved, the department will be provided routing instructions as well as direction to submit one set of the executed documents to the Clerk of the Board within 30 days.  
**For detailed instructions on submission requirements, reference Section 7.3 of the Board Agenda Item Guidelines as the Delegation of Authority does not eliminate the document submission requirements.**

Department/Agency/Entity: Community Development and Housing

Contact Name: Erica Watkins Telephone: (909) 501-0649

Agreement No.: 21-06 Amendment No.: 1 Date of Board Item 8/10/21 Board Item No.: 17

Name of Contract Entity/Project Name: State Emergency Solutions Grant Coronavirus Round 2

Explanation of request/Special Instructions:  
 On August 10, 2021, the Board authorized the Chief Executive Officer or the Assistant Executive Officer of Community Revitalization to submit grant documents and execute any subsequent non-substantiative amendments in relation to this award agreement. It is requested that the CEO sign the Authorized Signatories Form authorizing the Deputy Executive Officers to execute documents on behalf of the County as an authorized signatory. The State requires the Department to have an Authorized Signatories Form on file for any required signatures on future ancillary documents needed for the ongoing management of the program. **The submission of an updated Authorized Signatories form effectuates the change of signatories authorized for this grant and invalidates those who were previously authorized to sign.**

**Insert check mark that the following required documents are attached to this request:**

- Documents proposed for signature (Note: For contracts, include a signed non-standard contract coversheet for contracts not submitted on a standard contract form).
- Board Agenda item that delegated the authority

Department Routed to County Counsel	County Counsel Name: Suzanne Bryant	Date Sent: 12/20/2022
Reviewing County Counsel Use Only	Review Date <u>12/20/2022</u>  <u>Suzanne Bryant</u> Signature	Determination: <input checked="" type="checkbox"/> Within Scope of Delegated Authority <input type="checkbox"/> Outside Scope of Delegated Authority
CAO-Special Projects Use Only	Review Date <u>2/27/23</u>  <u>[Signature]</u> Signature	Disposition: <input checked="" type="checkbox"/> Route for signature to: <input type="checkbox"/> Chair <input checked="" type="checkbox"/> CEO <input type="checkbox"/> Department <input type="checkbox"/> Return to Department for preparation of agenda item