RESOLUTION

LNT-17-20

BE IT RESOLVED, by authority of the Lower Nazareth Township Board of Supervisors,

Northampton County, and it is hereby resolved by the authority of same, that the Township

Manager of said MUNICIPALITY is authorized and directed to submit the attached Application

for Traffic Signal Approval to the Pennsylvania Department of Transportation and to sign this

Application on behalf of the MUNICIPALITY.

ATTEST:

LOWER NAZARETH TOWNSHIP

RV

(Signature and designation of official title

I, Tammi Dravecz, Secretary/Treasurer of the Lower Nazareth Township Board of Supervisors, do hereby certify that the foregoing is a true and correct copy of the Resolution adopted a regular meeting of the Lower Nazareth Township Board of Supervisors, held the 24<sup>th</sup>

day of June, 2020.

DATE: 7-13-2020

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Resolution LNT-17-20



APPLICANT; and

Department; and

## APPLICANT'S AUTHORIZATION FOR AGENT TO APPLY FOR HIGHWAY OCCUPANCY PERMIT

If granting	g BLANKET Authorization to	submit applications on Applicant's behalf, check this box:
If BLANKET Authorization, mark N/A.	PERMIT APPLICATION NO.	213375
	COUNTY	Northampton
	CITY-BORO-TWP.	Lower Nazareth Township
	S.RSEGOFF.	S.R. 028-SEG 0410 - OFF. 150
APPLICA	NT	Name: Lower Nazareth Township  Address: 623 Municipal Drive Nazareth, PA 18064
AGENT		Name: Maser Consulting  Address: 941 Marcon Blvd, Suite 801 Allentown, PA 18109
	THORIZATION, made t	his <u>24</u> day of <u>June</u> , 20 <u>20,</u> by
APPLICA	NT for a highway occup	ancy permit under 67 Pa. Code Chapter 441 or 459.
the Comm order to oc	onwealth of Pennsylvanicupy the State highway;	
V apply for t	VHEREAS, the APPLIC he permit and any associ	ANT wishes to authorize the agent listed above (AGENT) to ated supplements on behalf of the APPLICANT; and
V allow the A	WHEREAS, the APPLIC. AGENT to apply for the p	ANT has agreed to grant a release to the Department to permit and any associated supplements on behalf of the

WHEREAS, the APPLICANT may elect to be provided contemporaneous email updates on the review status of the permit application and any associated supplements.

WHEREAS, as a condition of this authorization, APPLICANT agrees that AGENT will be required to provide APPLICANT with copies of all correspondence and other documents issued, mailed, emailed or otherwise directed or provided to APPLICANT or AGENT by the

## NOW, THEREFORE:

Date: <u>5/11/20</u>

1.	The APPLICANT does hereby authorize AGENT to act as APPLICANT's agent with respect to the permit application and associated supplements and to do all things necessary to obtain the permit and/or associated supplements on behalf of the APPLICANT.
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		the APPLICANT.			
	2.	The APPLICANT does hereby remise, release, quitclaim and forever discharge the Department, its agents, employees and representatives of and from all suits, damages, claims and demands of any type whatsoever arising against it as a result of granting the permit and its supplements to APPLICANT.			
	3.	The APPLICANT In has has not (check one) elected to be provided contemporaneous updates on the status of the permit application. If the APPLICANT elects to be provided contemporaneous updates on the status of the permit application, provide contact information here (email): <a href="mailto:lstauffer@lowernazareth.com">lstauffer@lowernazareth.com</a> .			
	4.	The APPLICANT understands that this AUTHORIZATION is effective until revoked in writing by the APPLICANT or AGENT, with contemporaneous written notice thereof to the Department.			
IN WITNESS WHEREOF, the APPLICANT has executed or caused to be executed these presents, intending to be legally bound thereby.					
by APPL	ICA	NT:			
(authoriz	ed re	epresentative signature)			
Name: L	ori S	Stauffer			
Title (if o	ther	than individual applicant): Township Manager			
		26/2020			
by AGEN	T:				
(authorize	ed re	presentative signature)			
Name: C	. Ric	chard Roseberry P.E.			
Title (if o	ther	than individual agent):			