

Contractor

Subcontractor

**AUTHORIZATION TO SIGN CERTIFIED PAYROLL FORMS**

**PROJECT:** \_\_\_\_\_

*I hereby authorize the following person(s) to sign Certified Payroll Forms for this project.*

NAME OF PERSON AUTHORIZED TO SIGN CERTIFIED PAYROLL FORMS	TITLE OF PERSON AUTHORIZED TO SIGN CERTIFIED PAYROLL FORMS

**COMPANY:** \_\_\_\_\_

**SIGNATURE OF OFFICER OR OWNER:** \_\_\_\_\_

**PRINTED NAME OF SIGNATORY:** \_\_\_\_\_

**TITLE OF SIGNATORY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Submit your Authorization with the first Certified Payroll Form.**