

**Authorization to Submit**

**Local Public Information & Engagement Technology (PIE)**

**Planning Opportunity Application**

I hereby authorize submission of this application, and agree that if selected, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will accept the consultation services between September and December 2020, and provide them with the necessary information and access to relevant municipal staff in order to accomplish the PIE Technology Assessment outlined in this application.

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Signature of Mayor Date

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Print Name

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Signature of Business Administrator Date

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Print Name