



Payroll Authorization Letter

Certificate from Contractor Appointing Officer or Employee to Supervise Payment of Employee

| PHFA Project Name: | | PHFA Project #: | |
|--|--|---|--|
| IFA Project Location: | Date: | | |
| (I) (We) hereby certify that (I am) (we are) (the prime con | ntractor) (a subcont | ractor) for | |
| | | (specify "General Construction", "Plumbing", etc.) | |
| in connection with construction of the above-mentioned l | Low-Rent Housing | Project, and that (I) (we) have appointed: | |
| | , whose signature | e appears below, to supervise the payment of (my) (our) | |
| (Appointed Party) | <u> </u> | | |
| employees beginning (Date:): | ; That he/she is in a position to have full knowledge of | | |
| the facts set forth in the payroll documents and in the stat | tement of complian | ce required by the so-called Kick-Back Statue which | |
| he/she is to execute with (my) (our) full authority and app | proval until such tir | ne as (I) (we) submit to the (Name of Local Authority): | |
| | F | (2) () | |
| a nev | w certificate appoin | ting some other person for the purposes hereinabove stated. | |
| | | | |
| | | | |
| (Appointed Party Signature) | | | |
| | | | |
| Attest (If required) | | | |
| | _ | (Firm or Company Name) | |
| | . | , | |
| (D. a.t. Name of Tally) | By: | (D. '.4 N 0 T'4L.) | |
| (Print Name & Title) | | (Print Name & Title) | |
| (Signature) | | (Signature) | |
| (Date) | | (Date) | |

<u>Note:</u> This certificate must be executed by an authorized officer of a corporation or by a member of a partnership, and shall be executed prior to and be submitted with the first payroll. Should the appointee be changed, a new certificate must accompany the first payroll for which the new appointee executes a statement of compliance required by the Kick-Back Statue.

Rev. 7/18 1 of 1