



**E- Signature Authorization  
San Bernardino County  
Community Development and Housing Agency  
Community Development Block Grant  
2019-2020 Application**

**Dena Fuentes**  
Deputy Executive Officer

**Gary Hallen**  
Director

In order to comply with all applicable federal grant regulations, a hard-copy of this E-Signature Authorization containing an original wet signature must be filed with the San Bernardino County, Community Development and Housing Agency (CDHA) in order for the applicant to electronically sign the Community Development Block Grant (CDBG) application documents online. This authorization may only be completed by a registered owner, partner, executive officer, or authorized employee (with proof of authorization) of the applicant submitting this form and must contain an original signature to be submitted to the CDHA.

Authorization Agreement

I am an owner, partner, executive officer, or duly authorized employee of the below-listed applicant and have authority to enter into agreements on behalf of the below-listed applicant. CDHA may rely on the receipt of such agreements executed and delivered by facsimile or other electronic means as if the original had been received. The undersigned agrees that the electronic signatures appearing on documents submitted from the below-listed applicant are the same as handwritten signatures for the purposes of validity, enforceability and admissibility. By signing this Electronic Signature Authorization Agreement, I authorize the CDHA to accept, via electronic submission, documents submitted from the below-listed applicant as required by the CDHA's CDBG 2019-2020 Funding Application. I understand that CDHA may change the CDBG application system from time to time. I agree that the below-listed applicant will electronically sign all documents requiring a signature related to the CDBG funding application.

My signature on this form certifies that:

I agree that entering my name in the CDBG funding application system constitutes my electronic signature. I understand that any information and documents submitted using my name is electronically certifying my signature. I understand that I am legally bound, obligated, and responsible by use of my electronic signature as much as I would be by my handwritten signature. I agree that I will protect my signature from unauthorized use, and that I will contact CDHA immediately, upon discovery that my electronic signature has been compromised. I certify that my electronic signature is for my own use, and that I will not delegate it or share it with any individual.

This request is effective immediately upon receipt by the CDHA and will remain in effect until the end of the 2019-2020 CDBG funding cycle or I choose to cancel this request via written notification to the CDHA. I understand that it is my responsibility to update and/or cancel this request under all circumstances, including my departure or terminated association with the below-listed applicant.

**By signing the E- Signature Authorization Form we certify that this agency will also comply with the following:**

Non-discrimination

This organization will, through all possible means, ensure equal opportunity for all persons to receive services, to participate in the volunteer structure, and to be employed regardless of age, handicap, national background, race, religion, or sex. An existing sectarian nature of the agency shall not suffer impairment under this agreement, but participation in religious observances, rituals or services will not be required as a condition of receiving food, services, or shelter paid for by this grant.

Accountability

We commit this organization, if a grant is received, to provide all reports to the County as required; to expend monies only on eligible costs; to keep complete documentation (copies of all canceled checks, invoices, receipts, etc.) on all expenditures for a minimum of three years; to spend all funds and close out the program on the required date; to return any unused funds to the County to cooperate with monitoring or site visits, and; to provide complete documentation of expenses to the County, if requested, by the required date.

We affirm that all information in this application is true and correct to the best of our knowledge and that the applicant under our authority will execute its responsibility under the proposed contract and adhere to all other applicable rules and regulations to the fullest extent possible.

Non-collusion

This proposal is genuine, and not sham or collusive, nor made in the interest or in behalf of any person not herein named; the proposer has not directly induced or solicited any other proposer to put in a sham proposal, or any other person, firm or corporation to refrain from submitting a proposal; the proposer has not in any manner sought by collusion to secure for him/herself an advantage over any other proposer.

Applicant Information	
Agency Name:	Federal Tax ID No.:
Mailing Address:	Phone No.:
Email Address:	Fax No:
Authorized Signature	
Print Name:	Print Title:
Signature:	Date:

Please send the signed copy of this one page agreement to:  
San Bernardino County Department of Community Development and Housing  
385 North Arrowhead Ave., 3<sup>rd</sup> Floor, San Bernardino, CA 94215-0043  
Attn: CDBG Application