

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
UAO CERTIFICATE OF INCUMBENCY AND SIGNATURE AUTHORITY
 for

Form 710-010-89
 UTILITIES
 02/89

CITY OF LEESBURG

(Please Type or Print the UAO's Name)

Resolution #: 5652

Date: March 22, 1999

I, the undersigned, do hereby certify that the person(s) or title(s) which appear below is (are) duly elected, or appointed, qualified, and acting as representative of said **UTILITY AGENCY/OWNER (UAO)**, on the date of this Certificate, and that said representative(s) is (are) duly authorized by said **UAO** to execute and deliver:

any document between said **UAO** and the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION (FDOT)** and all agreements and instruments in connection therewith, including but not limited to, applications for permits and similar documents, and that the execution and delivery of any such documents, for and on behalf of said **UAO** is not prohibited by, or in any manner restricted by, the terms of the charters, ordinances or legal instruments (as applicable) which created the **UAO**, govern its operations, and otherwise affect its authority, powers and day-to-day activities, or in any loan agreement, indenture, or contract to which said **UAO** is a party or under which it is bound.

- OR -

any utility permits between said **UAO** and the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION** and all documents in connection therewith, including but not limited to, applications for permits and similar documents, and that the execution and delivery of any such documents of said **UAO** is not prohibited by, or in any manner restricted by, the terms of the charters, ordinances or legal instruments (as applicable) which created the **UAO**, govern its operations, and otherwise affect its authority, powers and day-to-day activities, or in any loan agreement, indenture, or contract to which said **UAO** is a party or under which it is bound.

- OR -

any specified document type (listed below) between said **UAO** and the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION** and all agreements and instruments in connection therewith, and that the execution and delivery of any such documents, for and on behalf of said **UAO** is not prohibited by, or in any manner restricted by, the terms of the charters, ordinances or legal instruments (as applicable) which created the **UAO**, govern its operations, and otherwise affect its authority, powers and day-to-day activities, or in any loan agreement, indenture, or contract to which said **UAO** is a party or under which it is bound.

I do further certify that this authority shall remain in full force and effect, and the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION** shall be entitled to rely upon this authority, until written notice of the modification, rescission, or revocation of this authority, in whole or in part, has been delivered to the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION**. However, no such modification, rescission, or revocation shall, in any event, be effective with respect to any documents executed or actions taken in reliance upon any modification, rescission, or revocation of this authority prior to the delivery of written notice of such modification, rescission, or revocation to the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION**, and the **STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION** approves of such modification, rescission, or revocation of this authority in writing.

Name of Representative <small>(If by NAME Please Type or Print approved names)</small>	Title of Representative <small>(If by TITLE Please Type or Print approved titles)</small>	Approved to Sign <small>(Please check or specify type below)</small>	
		All Documents	Permits Only <small>Check Box That Applies</small> Specified Document Type
Anthony G. Otte	City Manager		
Joseph Tardugno	Electric Superintendent		

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CITY OF LEESBURG

(Please Type or Print the UAO's Name)

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Anthony G. Otte	City Manager			
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This document is a printout of an FDOT form maintained in an electronic format and all revisions thereto by the UAO in the form of additions, deletions or substitutions are reflected only in an Appendix entitled "Changes to Form Document" and no change is made in the text of the document itself. Hand notations on affected portions of this document may refer to changes reflected in the above-named Appendix but are for reference purposes only and do not change the terms of the document. By signing this document, the UAO hereby represents that no change has been made to the text of this document except through the terms of the appendix entitled "Changes to Form Document".

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said UAO this 22 day of March, year of 1999.

NOTE:

If more pages are required to list additional Representatives, insert the number of additional pages in the box below and attach them to this document.

- Pages are attached.

Submit this form to:

**FL Department of
 Transportation
 State Utilities Engineer
 605 Suwannee Street, M.S. 32
 Tallahassee, FL 32399-0450**

(Type or Print Name & Title)

Anthony G. Otte
 (Signature)
 Anthony G. Otte

Attest:

(Type or Print Name & Title)

(Signature)

(Type or Print UAO's Address)

City of Leesburg
 Anthony G. Otte, City Manager
 P. O. Box 490630
 Leesburg, Florida 34749-0630

Seal

(Type or Print UAO's Phone Number)
 (352) 728-9749

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City of Leesburg
 (Please Type or Print the **UAO's** Name)

Name of Representative <small>(If by NAME Please Type or Print approved names)</small>	Title of Representative <small>(If by TITLE Please Type or Print approved titles)</small>	Approved to Sign <small>(Please check or specify type below)</small>		
		All Documents	Permits Only	<small>Check Box That Applies</small> Specified Document Type
Anthony G. Otte	City Manager	<input type="checkbox"/>	<input type="checkbox"/>	

Anthony G. Otte