RESOLUTION 15-17

BE IT RESOLVED, by authority of theBoard of Supervisors	
(Name of governing body)	
of the Township of Amity, Berks County, and it (Name of MUNICIPALITY)	
is hereby resolved by authority of the same, that the <u>Chairperson</u> of (designate official title)	
said MUNICIPALITY be authorized and directed to sign the attached Agreement on its behalf.	
ATTEST: Township of Amity (Name of MUNICIPALITY) By: (Signature and designation of official title) Township of Amity (Name of MUNICIPALITY) (Signature and designation of official title)	: (1
I, <u>Kim McGrath</u> , <u>Chairperson, Board of Supervisors</u> (Name) (Official title)	
of the, do hereby certify that the foregoing (Name of governing body and MUNICIPALITY)	
is a true and correct copy of the Resolution adopted at a regular meeting of the	
Board of Supervisors, held the _5th _ day of _August, 2015 (Name of governing body)	
DATE: 8/13/15 (Signature and designation of official title)	

NOTE: Signature on the Department signature page of this Agreement must conform with signature on this Resolution.