“Authorized Representative” means an officer, principal or employee of a Member Utility authorized in writing by that entity to request, offer or provide assistance pursuant to the Mutual Aid Agreement.

Designation of an Authorized Representative is required by Section 2.4 of the Mutual Aid Agreement.

2.4 Authorized Representatives – Upon execution of this Agreement, each Member Utility shall designate and notify the VA WARN Committee of one or more Authorized Representatives authorized to act on its behalf in requesting or agreeing to provide assistance under this Agreement. Each Member Utility shall notify the VA WARN Committee whenever a current Authorized Representative(s) is no longer authorized to act on its behalf and whenever it designates a new or additional Authorized Representative. All notices pursuant to this Paragraph shall be made in writing on a form provided by the VA WARN Committee, which shall include 24-hour access contact information and shall be signed on behalf of the Member Utility. If a Member Utility designates more than one person as an Authorized Representative, each Authorized Representative shall be considered fully authorized to act for the Member Utility in requesting or agreeing to provide assistance under this Agreement, and each Authorized Representative shall have the responsibility for expedient notification of the other Authorized Representative(s) within the Member Utility of requests for assistance that he has made or assistance he has agreed to provide on behalf of the Member Utility.

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The information provided on this form will be on the VA WARN website and available only to VA WARN members

VDH Waterworks Operation Permit # __________________________
VPDES Wastewater Permit # __________________________
Utility Name: ____________________________________________
Address: ______________________________________________
City: __________________________________________________
Zip Code: ______________________________________________
County: ________________________________________________
Website: ______________________________________________
Telephone Number: ______________________________________
Type of Utility (Water, Wastewater, or Water/Wastewater): _______________
**Authorized Representative(s)**

The VA WARN web site will accommodate up to four names and a telephone number for each.

Please provide a telephone number that is available at all times, i.e. a 24/7 number. The goal is to ensure the “authorized representative(s)” can be alerted to an emergency during nights, weekends, and holidays.

Please use a number such as:

1. A 24/7 operations control center or,
2. A water/wastewater treatment plant or,
3. A Non-emergency 911

**Contact # 1**

Name: __________________________________________
Telephone: ________________________________________
Cell Phone: ________________________________________
e-mail: __________________________________________

**Contact # 2**

Name: __________________________________________
Telephone: ________________________________________
Cell Phone: ________________________________________
e-mail: __________________________________________

**Contact # 3**

Name: __________________________________________
Telephone: ________________________________________
Cell Phone: ________________________________________
e-mail: __________________________________________
Contact # 4

Name: ____________________________________________
Telephone: _________________________________________
Cell Phone: _________________________________________
e-mail: ____________________________________________

SUBMITTED BY:

Please print or type name: ___________________________

SIGNATURE ________________________________________

Please mail form to:

Cathy J. LaRue  
VA AWWA  
P. O. Box 55420  
Virginia Beach, VA 23471  
Tel: 757.363.1760  
FAX: 757.363.1720  
E-mail: cathy.larue@vaawwa.org