

**SIGNATURE DELEGATION**  
**For Permit Applications, Compliance Reports and Notice Responses**

I, (aa) "of  
(.....) A, ("Company")  
located "at" (.....) appoint"  
(aa), as the Company Agent (attorney-in-fact) to act or the  
Company in any lawful way with respect to the following subject:

To discuss, sign, execute and deliver any and all documents, reports, forms and  
similar items such as Permit Applications, Periodic Compliance Reports, Notice of  
Violations Responses, Certifications and other MSD forms on behalf of  
(aa) in all matters involving, "directly or  
indirectly, the Metropolitan Sewer District of Greater Cincinnati with respect to  
(aa) premises located at  
(aa).

**Choice of Law.** THIS POWER OF ATTORNEY WILL BE GOVERNED BY THE  
LAWS OF THE STATE OF OHIO WITHOUT REGARD FOR CONFLICTS OF  
LAWS PRINCIPLES. IT IS INTENDED TO BE VALID IN ALL JURISDICTIONS  
OF THE UNITED STATES OF AMERICA.

I am fully informed as to all the contents of this form and understand the full import  
of this grant of powers to my Agent.

I agree that any third party who receives a copy of this document may act under it.  
Revocation of the power of attorney is not effective as to a third party until the third  
party learns of the revocation. I agree to indemnify the third party of any claims that  
arise against the third party because of reliance on this power of attorney.

Signed this \_\_\_a\_ day of (aaaaaaaaaa, '.....').

**(aa).**

By: \_\_\_\_\_  
Signature of Authorized Representative

To: \_\_\_\_\_  
Agent

\_\_\_\_\_  
Printed Name/Title Authorized Representative

\_\_\_\_\_  
Printed Name/Title Agent