



Disclosure Authorization

ENTERPRISE ZONE, QUALITY JOBS, INDUSTRIAL TAX EXEMPTION & RESTORATION TAX ABATEMENT

BUSINESS OR APPLICANT NAME

PROJECT NUMBER

PHYSICAL ADDRESS OF PROJECT SITE

CONTRACT TYPE Quality Jobs Enterprise Zone Industrial Tax Exemption Restoration Tax Abatement

**A separate Disclosure Authorization is required and must be submitted separately for each program.*

DECLARATION OF AUTHORIZED REPRESENTATIVE

This authorized representative must have legal authority to complete and sign this document.

I, _____ of _____,
Printed Name and Title Business Name

do hereby authorize _____ of _____,
Contact Person Designated Third Party

at _____,
Mailing Address

_____, _____,
Email Address Telephone #(s)

to act as the representative regarding the referenced project number as it pertains to the above referenced incentive program and give permission to Louisiana Economic Development to discuss, mail, receive, and send correspondence to and from the stated designated party. I understand this form does not give authority to sign documents on my behalf.

Signature

Printed Name and Title

Date

Submit 1 original to:

Louisiana Economic Development
Office of Business Incentive Services
P.O. Box 94185
Baton Rouge, LA 70804-9185