Reset Form

RELINQUISHMENT OF AUTHORITY FOR SUBMITTING CONSERVANCY DATA THROUGH THE GATEWAY WEBSITE AND AUTHORIZING ADDITIONAL USERS

State Form 55807 (3-15)
Prescribed by the Department of Local Government Finance

I. RELINQUISHMENT OF AUTHORITY

Name of Delegating Chairman: _____

Name of Delegate (Financial Clerk/Secretary): _____

Email Address of Delegate (Financial Clerk/Secretary): _____

Name of Unit: _____

I, the undersigned Delegating Chairman, pursuant to the authority vested in me for the submission of budget forms through the Gateway website on behalf of the Unit, hereby delegate to the above-designated Delegate the following authority for the limited purposes set forth herein:

1. Delegate may submit budget forms through the Gateway website and authorize additional edit and read-only users on my behalf.

2. Delegate may access the Unit's Gateway website by means of the login and password created and distributed by the Department to the Delegate.

3. Upon signing this Relinquishment of Authority, the undersigned Delegating Chairman relinquishes authority to submit budget forms through the Gateway website and to authorize additional edit and read-only users until this Relinquishment of Authority for Submitting Conservancy Data through the Gateway Website and Authorizing Additional Website Users is revoked by the Delegating Chairman or my successor Chairman.

I acknowledge that this Delegation does not affect the Unit's duties or responsibilities under the Indiana Code, and that I remain responsible for the accuracy, completeness, timeliness, and submission of all budget forms. I hereby represent that I have the real and apparent authority to sign this Delegation.

IN WITNESS WHEREOF, I have hereunto set my hand this ____ day of _____, 20___

_____ _____

(Signature of Delegating Chairman) *(Printed name of Delegating Chairman)*

II. ACKNOWLEDGMENT BY DELEGATE

I, the Delegate in the above and foregoing, hereby acknowledge and accept the terms of the limited delegation of authority.

_____ _____

(Signature of Financial Clerk/Secretary) *(Printed name of Financial Clerk/Secretary)*

NOTICE OF LIMITATION OF LIABILITY BY DEPARTMENT

Upon receipt of a fully executed State Form 55807 from a local government unit, the Department will provide the unit's delegate with a login and password for access to the unit's Gateway site. The Department is not a party to such a Delegation and has no other responsibility or liability in connection therewith. The Department does not assume any liability or responsibility for the work product or actions of the delegate, or for the accuracy, completeness, timeliness or usefulness of any material displayed or distributed through the Gateway website database. The Department makes no warranty, express or implied, with respect to the information included in the Gateway website database and has no responsibility or liability therefore.