



212-615-8329 housing@recovery.nyc.gov nyc.gov/builditback

FIO: Affidavit of Authority to Bind Corporation

STATE OF NEW YORK

COUNTY OF

I, _____, do swear or affirm, under penalty if perjury that:

I. I am a corporate officer, partner or owner of:

(the "Company") and I am authorized to legally bind the Company and to execute documents on behalf of the Company.

Signature

Sworn to before me this ____ day of _____, 20 ___,

Notary Public