



# 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