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

I, (aa	aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	iaaa)	"of
(	aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa		("Company")
•	aaaaaaaaaaaaaaa), as the Company Age	•	· · · · · · · · · · · · · · · · · · ·
Comp	pany in any lawful way with respect to the fol	lowing	g subject:
simila Viola (aaaa indire (aaaa	iscuss, sign, execute and deliver any and a ar items such as Permit Applications, Period tions Responses, Certifications and other aaaaaaaaaaaaaaaaaaaaaaaaaaaa) in all m ectly, the Metropolitan Sewer District of C aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	lic Co MSD latters Greater cated	ompliance Reports, Notice of forms on behalf of involving, directly or r Cincinnati with respect to at
LAW LAW	ce of Law. THIS POWER OF ATTORNEY S OF THE STATE OF OHIO WITHOUT S PRINCIPLES. IT IS INTENDED TO BE HE UNITED STATES OF AMERICA.	REGA	ARD FOR CONFLICTS OF
	fully informed as to all the contents of this for grant of powers to my Agent.	orm a	nd understand the full import
Revoo party	ee that any third party who receives a copy cation of the power of attorney is not effective learns of the revocation. I agree to indemnifulation against the third party because of reliance on	ve as try the	to a third party until the third third party of any claims that
Signe	d thisa_ day of (aaaaaaaaaa, ······).		
(aaaa	аааааааааааааааааааааааааааааааааааааа		
By:		To:	
-	Signature of Authorized Representative		Agent
	Printed Name/Title Authorized Representati	ve	Printed Name/Title Agent