**Affidavit of Consent and Authority**

Note: This affidavit may be used by an applicant for a per diem (temporary) license when the applicant (the person signing the application and appearing at the hearing) is neither (1) an officer of the corporation nor (2) an authorized person of the limited liability company.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert printed name) am the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert Officer Designation such as “President” or “Secretary” or Authorized Person) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert entity name).

In my capacity as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert title), I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert printed name of applicant) has the consent and authority of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert entity name) to apply for and be issued a per diem (temporary) license by the Board of License Commissioners.

This consent and authority shall expire in one year from the date hereof or sooner if revoked in writing.

I swear and affirm, under the penalties of perjury, that the statements made above are true and accurate and are based on my personal knowledge.

This Affidavit of Consent and Authority is dated this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :

I hereby certify, that on this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, before me, the Subscriber, a Notary Public of the State and County aforesaid, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and acknowledged the foregoing Affidavit to be his/her duly authorized act.

As witness my hand and Notarial Seal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

My commission expires: \_\_\_\_\_\_\_\_\_\_