

RESOLUTION NO. _____

**RESOLUTION AUTHORIZING THE DESIGNATION OF SIGNATURE AUTHORITY WITH THE
CITY OF ASHEVILLE DEPARTMENT OF TRANSPORTATION
FOR GRANT YEARS FY 2025 – FY 2029, FOR FEDERAL TRANSPORTATION ASSISTANCE
AUTHORIZED BY 49 U.S.C. 5310, UNITED STATES CODE, OTHER FEDERAL STATUTES
ADMINISTERED BY THE FEDERAL TRANSIT ADMINISTRATION
OR STATE STATUTES ADMINISTERED BY THE STATE OF NORTH CAROLINA**

WHEREAS, the City of Asheville Department of Transportation has been delegated authority to disburse federal financial assistance for transit projects as allocated throughout the United States by urbanized area;

NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners for the County of Buncombe as follows:

1. That t the Buncombe County Board of Commissioners authorizes the Buncombe County Manager, Assistant County Manager, or his or her designee, to execute and file an agreement for federal assistance on behalf of Buncombe County with the City of Asheville for federal assistance authorized by 49 U.S.C. Chapter 5310 United States Code, other federal statutes or state statutes authorizing a project administered by the Federal Transit Administration.
2. That the Buncombe County Board of Commissioners authorizes the Buncombe County Manager, Assistant County Manager, or his or her designee to execute and file with its applications the annual certifications and assurances or other documents the City of Asheville requires before finalizing a federal assistance grant or cooperative agreement.
3. That the Buncombe County Board of Commissioners authorizes the Buncombe County Manager, Assistant County Manager, or his or her designee to execute grant and cooperative agreements with the City of Asheville on behalf of Buncombe County.
4. That this Resolution is effective upon its adoption.

Adopted this 4th day of February, 2025.

ATTEST:

BOARD OF COMMISSIONERS
FOR THE COUNTY OF BUNCOMBE

Sarah Gross, Clerk to the Board

By: _____
Amanda Edwards, Chairperson

APPROVED AS TO FORM:

County Attorney

5310 DESIGNEE CERTIFICATION FORM

The undersigned duly qualified Clerk to the Board, acting on behalf of Buncombe County, certifies that the foregoing is a true and correct copy of a resolution adopted at a legally convened meeting of the Buncombe County Board of Commissioners held on the 4th day of February, 2025.

(COUNTY SEAL)

(Signature of Recording Officer)

Clerk to the Board
(Title of Recording Officer)

(Date)