

**LOUISIANA HOUSING CORPORATION (LHC) LOW INCOME HOME ENERGY
ASSISTANCE PROGRAM (LIHEAP)
HANCOCK ENERGY SOFTWARE (HES) ADMINISTRATOR AUTHORIZATION
FORM**

Agency Name: _____

I, _____ (Executive Director/President), do hereby certify the person(s) listed below are designated by me to act as the Hancock Energy Software (HES) LIHEAP Agency Administrator for the Agency. If this information changes, I will inform Louisiana Housing Corporation (LHC) immediately of any changes.

LHC will grant LIHEAP Agency Administrator access to an individual who has been granted authority on behalf of the Agency, and whose signature legally binds the Agency entity and controlling individuals to the terms and conditions specified in the Louisiana Housing Corporation Low Income Home Energy Assistance Program (LIHEAP) Agreement with the above named Agency.

PERSON(S) AUTHORIZED TO HAVE HES LIHEAP AGENCY ADMINISTRATOR ACCESS:

Name of authorized Agency Administrator

Title of Designee

Name of authorized Agency Administrator

Title of Designee

SIGNATURE AND TITLE OF DULY AUTHORIZED REPRESENTATIVE:

NAME:

TITLE:

DATE: