

## CERTIFICATION

I, \_\_\_\_\_ am authorized to sign this certification on behalf of \_\_\_\_\_.  
(Insert name of local jurisdiction)

I certify to the following:

*Please check all the following that apply to your jurisdiction:*

1. \_\_\_\_ **911 Charges/Access to Communication Services** - Ordinance No. \_\_\_\_ of the \_\_\_\_\_ imposes the local charge set forth in the ordinance to prepaid mobile telephony services for access to communication services or to local 911 emergency telephone systems. As required by section 42102.5, the percentage reflecting the rate for access to the local 911 emergency telephone systems or access to communications services is \_\_\_\_\_.  
(Insert name of local jurisdiction)
2. \_\_\_\_ **Utility User Tax** - Ordinance No. \_\_\_\_ of the \_\_\_\_\_ imposes the local charge set forth in the ordinance to the consumption of prepaid mobile telephony services. The tiered rate for the utility user tax, as identified in section 42102 is \_\_\_\_\_.  
(Insert name of local jurisdiction)
3. The \_\_\_\_\_ agrees to indemnify and to hold harmless the Board of Equalization (Board), its officers, agents, and employees for any and all liability for damages that may result from the Board's collection pursuant to this agreement.  
(Insert name of local jurisdiction)

Executed in the \_\_\_\_\_ on \_\_\_\_\_.  
(Insert name of local jurisdiction) (Add date)

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Title of person \_\_\_\_\_