

Certification of Authorized Business Representative

A. Claimant Information

Name of Business	
DBA Name, if applicable	
Deepwater Horizon Settlement Program Claimant Number	

B. Business Representative Status

To receive payment under the Settlement Program, the claimant or authorized business representative must sign a Full and Final Release, Settlement, and Covenant Not to Sue ("Release"). The Settlement Program has been unable to verify the name and title of the signer on the Release you provided as either the claimant or an authorized business representative based on the supporting documents on file with the Settlement Program at this time.

Enter the name and title of the individual who is authorized to act on behalf of the business and has the legal authority to sign the Release, if applicable, in the section below. In order for the Settlement Program to complete approval of the submitted Release, the name and title of the individual being provided on this Certification must exactly match the name and title on the Release previously provided to the Settlement Program.

Authorized Business Representative's Name	<small>Last Name</small>	<small>First Name</small>	<small>Middle Initial</small>
Title, if applicable			

C. Signature

By my signature below, I certify and declare pursuant to 28 U.S.C. Section 1746 that the information provided in this Certification of Authorized Business Representative is true and accurate to the best of my knowledge.

I certify that I am authorized to act on behalf of the business submitting the Release.

An attorney may sign his or her name on behalf of the claimant if the claimant has authorized the attorney in a Power of Attorney Agreement, a retainer agreement, or other document signed by the authorized business representative in which the claimant has authorized the attorney or law firm to pursue claims for the claimant arising out of the Deepwater Horizon Incident. If the attorney chooses this option, the attorney must either submit, or have already submitted, a PDF of the signed authorization from the claimant before the signature can be accepted. If the attorney does not have a signed authorization from the claimant, the attorney may use the Power of Attorney Form created by the Claims Administrator for this purpose (POA-1), which is available using the Forms section of the website, www.deepwaterhorizonsettlements.com. **We do not require signatures from both the attorney and the authorized business representative.**

As the authorized attorney, by signing below, you are certifying that you have the required written authorization from the claimant to pursue claims for the claimant arising out of the Deepwater Horizon Incident on their behalf and have submitted this authorization.

Authorized Business Representative's Signature		Date	____/____/____ <small>(Month/Day/Year)</small>
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Printed Name, and Title			
Attorney Signature		Date	____/____/____ (Month/Day/Year)
Printed Name			
Law Firm			

D. How to Submit this Form

Submit the signed **Certification of Authorized Business Representative** in one of these ways:

By Mail	Deepwater Horizon Economic Claims Center PO Box 10272 Dublin, OH 43017-5772
By Overnight, Certified or Registered Mail	Deepwater Horizon Economic Claims Center c/o Claims Administrator 5151 Blazer Parkway Suite A Dublin, OH 43017
By Facsimile	(888) 524-1583
By Email	ClaimForms@deepwaterhorizoneconomicsettlement.com