

**“RESOLUTION”**  
**CONTACT PERSON FOR THE EMPLOYMENT PRACTICES LIABILITY**  
**ATTORNEY CONSULTATION SERVICE**  
**BURLINGTON COUNTY MUNICIPAL JOINT INSURANCE FUND**

WHEREAS, the Governing Body of \_\_\_\_\_  
hereinafter referred to as "MUNICIPALITY" , is a member of the Burlington County Municipal  
Joint Insurance Fund, hereinafter referred to as "FUND"; and

WHEREAS, the FUND has adopted a policy authorizing the Employment Practices Liability  
Attorney Consultation Service; and

WHEREAS, the FUND has budgeted an annual allowance for each member for EPL consulting  
services; and

WHEREAS, the FUND requires the MUNICIPALITY to designate specific managerial or  
supervisory individuals who will have telephone access to the EPL Hotline;

NOW THEREFORE, be it resolved that the governing body of \_\_\_\_\_  
does hereby appoint \_\_\_\_\_ as its Contact Person.

BE IT FURTHER RESOLVED that the governing body does hereby appoint \_\_\_\_\_  
\_\_\_\_\_

as additional Contact Persons.

ATTEST: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_

By: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

AYES: \_\_\_\_\_

NAYS: \_\_\_\_\_

ABSTAIN: \_\_\_\_\_

DATE: \_\_\_\_\_