

Management Commitment Letter

Date _____

Company/Worksite Name

Business License #

City of Santa Monica
Mobility Division
1685 Main St., Room 115
P.O. Box 2200
Santa Monica, Ca 90407-2200

As the highest ranking official at this worksite, or as the executive officer responsible for allocating the resources necessary to implement the plan, I attest the attached Worksite Transportation Plan will be implemented as described and as approved by the City of Santa Monica.

I further declare that, in accordance with SMMC Chapter 9.53, all data in the plan is accurate and verifiable to the best of my knowledge.

Sincerely,

Signature of Highest Ranking Official

Print or type name

Title

Telephone Number