**APPENDIX D**

**TWA ALLOTMENT REQUEST FORM AND INSTRUCTIONS**

**Reimbursable Temporary Work Authority (TWA) Allotment Request Form**

Fund Code: \_\_\_\_\_\_\_ LO: \_\_\_\_\_\_\_ Reimbursable Project Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Program Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TWA Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Existence of Reimbursable Work ⬜

Period of Performance (only valid for 3 months): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exception ⬜

Related Direct Project/Task Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(To be charged in the event of cost overrun)*

Customer/Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Reimbursable Project: WIP \_\_\_\_\_\_\_\_ RSFF \_\_\_\_\_\_\_\_\_\_

**Temporary Work Authority:**

(Check One) New Fiscal Year ⬜ Increase ⬜ Decrease ⬜ **Amount: $** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Allotment:**  New ⬜ Increase ⬜ Decrease ⬜ **Amount: $** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Organization Code *(FMC levels 1 & 2)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Allotment Distribution:** First Quarter Second Quarter Third Quarter

**Note: A TWA cannot be obtained after June 30**

 *(Dollars & Cents)* $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_

**NOAA Line Office Contacts:**

Billing Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Requirements:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approval Signatures:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOAA Program Manager Name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOAA Line Office CFO/Staff Office Director Name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOAA Chief Financial Officer Name Date

**\*Please note - All requests for TWAs must include the following:**

* **A written valid commitment (e.g., letter of intent, email from the sponsor, or email transmitting the unsigned agreement to the NOAA OGC for review);**
* **A summary of the scope of work; and**
* **TWA tracking number**

**RADG002 Control Number: \_\_\_\_\_\_\_\_\_\_\_** **RADG003 Control Number: \_\_\_\_\_\_\_\_\_\_\_\_\_**

 *(Use “N/A” for RSFF Projects) (For Finance Office use)*

 **APPENDIX D**

**Reimbursable Temporary Work Authority (TWA) Allotment Request Form Instructions**

The Reimbursable Temporary Work Authority(TWA) Allotment Request Form has been developed for LO/FMC reimbursable users to submit as a request for the Finance Office (Accounts Receivable Branch) to establish a TWA and for the NOAA Budget Office to establish an allotment for a TWA project. This form should be submitted, per Reimbursable Standard Operating Procedures, when requesting changes to a TWA or period of performance for all reimbursable TWAs.

For TWA projects, this form should be completed, signed, and forwarded, along with a copy of the required TWA documentation through the appropriate Line Office Chief Financial Officer (LO CFO) / Staff Office Director to your Finance billing contact. Finance will review the documents and the unapproved RADG002 Reimbursable TWA transaction and let the LO headquarters reimbursable contact know if any changes are required. If no changes are required (or once corrections have been made), Finance will approve the RADG002 transaction, and forward copies of the documents to your Budget Execution contact so they can record the allotment for the TWA project.

|  |  |
| --- | --- |
| The following table describes the information that should be entered for each field on the Form: **Field Name**  | **Description**  |
| ***Fund Code***  | Enter the reimbursable fund code associated with the project: 0006 for NOAA WIP projects with an advance 0007 for NOAA WIP projects without an advance 0096 for NOAA reimbursable sales/fixed fee projects with an advance 0097 for NOAA reimbursable sales/fixed fee projects without an advance.  |
| ***LO***  | Enter the first two digits of the organization code for the Line Office with primary responsibility for the reimbursable agreement or the reimbursable sales/fixed fee project. 01 Office of the Under Secretary 06 NOAA Finance and Administration 08 NOAA Marine and Aviation Operations 10 National Ocean Service 20 National Weather Service 30 National Marine Fisheries Service 40 National Environmental Satellite, Data & Information Service 50 Office of Oceanic and Atmospheric Research 60 Program Planning and Integration  |
| ***Reimbursable Project Code***  | Enter the CFS reimbursable project code. Valid project codes may be found on the NOAA FSD web site: <https://cbsquery.rdc.noaa.gov/search/jrr_projtasklist2005.htm>  |

|  |  |
| --- | --- |
| ***Program Code***  | Enter the CFS program code. Program codes may be found on the ACCS validation screen on the NOAA FSD web site: <https://cbsquery.rdc.noaa.gov/search/validateCAMSaccs310g.html>  |
| ***TWA Number***  | Enter the temporary work authority (TWA) number supporting the request if it is not yet supported by a formal agreement. This should be the TWA No. from the RADG002 Reimbursable Agreement screen. Please use the following TWA No format: TWA-FY-LO-FMC#01. For example, TWA-2013-20-01#01. However, sometimes a contract, MOU, or agreement number is provided by the customer. That number should be entered here.  |
| ***Existence of Reimbursable Work*** | Uncheck this box if this request is a new TWA. TWA between the performing NOAA organization and the sponsor must be in existence prior to the performance of reimbursable work. |
| ***Period of Performance*** | Enter the period of performance. TWA will only be valid for three months.  |
| ***Exception*** | Check this box if this request is an exception. An Exception may be granted for an additional three-month period if sufficient need is demonstrated. The only exception would be for disaster/emergencies where NOAA is directed to assist. This exception must be justified in a memo to NOAA CFO for approval. |
| ***Related Direct Project Code***  | Enter the direct project code that costs should be transferred to in the event of an overrun. Note: The Line Office will be notified if a cost transfer is required. |
| ***Customer/Contact No.*** ***Name***  | Enter the customer organization’s number and name (e.g. 366 Department of Energy, Capital Accounting Center) from the AR071 Lookup screen.  |
| ***Description of Activity***  | Enter a description of the activity to be performed under the reimbursable TWA project. Be as specific as possible.  |
| ***Temporary Work Authority:*** ***New Fiscal Year*** | *(This section should be completed for all reimbursable TWA projects.)* Check this box if this TWA request is the first one for the fiscal year for this project.  |
| ***Increase***  | Check this box if the TWA amount for this project should be increased.  |
| ***Decrease***  | Check this box if the TWA amount for this project should be decreased.  |
| ***Amount***  | Enter the total amount (dollars and cents) of the new TWA to be recorded. This should be the TWA amount based on a written valid commitment by the sponsoring agency for the current fiscal year. A project cannot be authorized for more than 25 percent of the estimated amount. For an increase to a TWA, enter the amount of the increase with a plus (+). For a decrease to a TWA, enter the amount of the decrease with a minus (-).  |
| ***Allotment:*** ***New***  | *(This section should be completed for all reimbursable TWA projects.)* Check this box if this allotment request is the first one for the fiscal year for this project.  |
| ***Increase***  | Check this box if the allotment amount for this project should be increased.  |
| ***Decrease***  | Check this box if the allotment amount for this project should be decreased.  |
| ***Amount***  | For a new allotment, enter the total allotment amount (dollars and cents) being requested. For an increase to an allotment, enter the amount of the increase with a plus (+). For a decrease to an allotment, enter the amount of the decrease with a minus (-). The allotment amount should never exceed the TWA amount entered above.  |
| ***Organization Code***  | Enter the first two segments (FMC level) of the organization code to be used for recording the allotment.  |
| ***Allotment Distribution***  | For a new allotment, enter the amount (dollars and cents) Budget Execution should establish for each quarter. For an increase or decrease, enter the appropriate share (dollars and cents) of the total increase or decrease for each quarter with the appropriate plus or minus. A TWA cannot be obtained after June 30th. |
| ***NOAA Line Office Contacts:*** ***Billing Contact Name***  | Enter the name of the NOAA Line Office / Staff Office person the Finance Office should contact with any billing questions.  |
| ***Phone Number***  | Enter the phone number for the NOAA billing contact.  |
| ***Program Contact Name***  | Enter the name of the NOAA person responsible for the activity (may be the same as the billing contact).  |
| ***Phone Number***  | Enter the phone number for the NOAA program contact.  |
| ***Special Requirements:***  | Enter any other unique circumstances or requirements related to this project.  |
| ***Approval:*** ***NOAA Program Manager*** | The form should be signed by the NOAA program manager responsible for the program along with their typed or printed name and date of signature. |
| ***Approval:*** ***NOAA Line Office Chief Financial Officer***  | The form should be signed by the NOAA Line Office Chief Financial Officer (LO CFO) responsible for the program along with their typed or printed name and date of signature.  |
| ***Approval:*** ***NOAA Chief Financial Officer***  | The form should be signed by the NOAA Chief Financial Officer (CFO) responsible for the program along with their typed or printed name and date of signature. |
| ***RADG002 Control Number***  | Enter the RADG002 Control Number for the Reimbursable TWA. For Reimbursable Sales/Fixed Fee (RSFF) projects, enter “N/A” since no RADG002 transaction is entered. |
| ***RADG003 Control Number*** | Line Office/FMC users should leave this field blank. Finance will use this field to record the RADG003 Control Number after they enter the Unfilled Customer Order. |
| ***Note:*** | All requests for TWAs must include the following:* A written valid commitment (e.g., letter of intent, email from the sponsor, or email transmitting the unsigned agreement to the NOAA OGC for review);
* A summary of the scope of work; and
* TWA tracking number.
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