

Instructions for EPA Payment Request Form 190-F-04-001

The following instructions are provided for completing the U.S. EPA Payment Request Form 190-F-04-001, used to request payment from EPA for Assistance Agreements or grants. You may request funds as often as required by your organization, and this form can be used to request reimbursement and advance funds. However, if you are requesting advance funds, the funds must be disbursed as soon as possible to minimize Federal Cash on Hand, as required by the U S Treasury. Please note that EPA does not issue payment of the entire award amount at once.

- Recipient Name:** Enter the recipient organization name exactly as stated on your EPA Assistance Agreement/Amendment or grant award.
- Contact Person:** Your name or someone who can be contacted if EPA personnel have questions regarding your payment request.
- Phone #:** Recipient point of contact phone number.
- Fax #:** Recipient fax number.
- Email Address:** Recipient email.
- EFT#:** Use your assigned EFT number. If you do not know your assigned EFT number, please contact your [LVFC regional contact](#).
- Request#:** This is a transmittal number between your office and EPA's Las Vegas Finance Center. Enter the number assigned to this request. The requests are to be numbered consecutively starting with 0001. If a request is rejected, the next request is assigned the next consecutive number.
- Cash on Hand \$:** Enter the total amount of unspent EPA cash currently in your bank account at the time of submission of the request. If you do not have any EPA funds on hand, then you would enter 0. If you are requesting reimbursement for expenses already incurred, the cash on hand should represent the deficit amount as a negative figure. NOTE: Funds should be disbursed within 3-5 business days if you are requesting an advance.
- Assistance Agreement Number:** Your grant or assistance agreement number, to include the alpha prefix (if you have multiple agreements you may list up to 12 agreements on this form per request).
- Account No/Activity Code:** Used when you have a superfund, LUST, or state revolving fund agreement to identify specific site/job. This item is not applicable to international recipients.

Amount: Enter the dollar amount requested from each grant or assistance agreement listed on the form. If you are in need of a large advance of funds, you will need to provide a narrative of your estimated budget outlays for a period of no more than 90 days. EPA will reimburse you for the total of any debts your organization has already incurred against an agreement or grant.

Mark (X) if Credit: This column is used if you are transferring funds between two agreements or if you are returning excess funds to EPA. If you are returning funds, please notify your EPA Accounting Technician for assistance with the transfer.

Total Amount Requested: Enter the total dollar amount of EPA funds you are requesting.

Approvals: Place for the signature of a representative who has the authority for making financial decisions within the organization.

Date Approved: Date of signature.

Please type or write legibly. Upon completion, fax signed request form to **U.S. EPA LVFC at 702-798-2423**. Incomplete request forms may be rejected.