

# TAG Recipient Manual

## Requesting Payment

This section outlines the types of payment that may be available to you as a TAG recipient and the forms of payment that EPA regional offices use to provide funds to you. It also describes the arrangements you may have to make to receive payment, how to prepare your payment request, and how to submit your request to EPA for payment. Samples of completed forms, using a fictitious TAG recipient, are provided to illustrate how to fill out necessary forms properly.

*(NOTE: Each sample of a completed form may not track with other sample reports shown throughout this manual for the fictitious Woodtown Landfill Coalition.)*

### 5.1 Types of Payment: Advance Payments and Reimbursement Payments

**Under the TAG program, EPA pays your group back (“reimburses” you) for costs and expenses incurred, up to the amount of the federal share of the TAG.** This means that your group must incur costs (spend money or be billed) before EPA can pay you.

**Remember:** The types of items for which you request reimbursement must be included in your approved TAG application and/or grant agreement.

There is only one exception to this practice: your group can ask for a one-time advance payment of up to \$5,000 when you first get your TAG, provided that it is an approved item in your grant (see below). You can use an advance payment to pay for the items that are approved by your EPA regional project officer. Advanced payments may be used only for the purchase of supplies and equipment, the payment of the first deposit to open a bank account, the rental of equipment, the first month’s rent of office space, advertising for a technical advisor, renting or buying office equipment, or acquiring other items your group needs to get started. You *cannot* use advance payments for petty cash, or to pay for contracts for technical advisors or other contractors, or to pay your group’s incorporation costs.

**To be eligible for an advance payment, you must request one in writing, preferably in your original TAG application.** You also must identify what activities, goods, or services you plan to purchase with the advance payment. If your request is approved, your TAG award agreement will contain a “special condition” stating the amount of the advance and the purposes for which it may be used. If an advance payment condition is not included in your approved TAG award agreement and your group needs an advance, talk to your EPA project officer/regional TAG coordinator about whether your TAG can be formally amended to allow it.

You must use your advance for the specific purposes specified in your request for a cash advance. If you do not use it for the purposes you specified in your request, you will have to return the funds to EPA. If you use the advance payment for the purposes specified in your request but the actual costs incurred are less than the advance, the remainder becomes a credit towards your first request for reimbursement. This means that when you submit your first request for reimbursement, you will itemize your allowable costs eligible for reimbursement and then deduct the amount of the excess advance from the total reimbursement request.

### 5.2 Forms of Payment

EPA makes payments under its grants by way of Electronic Funds Transfer (EFT) or through the Department of Treasury’s Automated Standard Application for Payments (ASAP). When you accept a

grant, you agree to use one of these electronic methods to request and receive payments. The method and form of payment is specified in your TAG award agreement. You may begin requesting payments after you have enrolled in one of the systems.

If you will be paid using EFT, a representative from an EPA Financial Management Office will contact you and assist in enrolling. For EFT transactions, you:

- Must file your organization's banking data with the Las Vegas Finance Center (LVFC). You do this by completing the [ACH Vendor/Miscellaneous Payment Enrollment Form, SF3881](#) and faxing it to the LVFC at (702) 798-2423.
- Will receive the EFT number from the LVFC.
- Must, in order to receive a payment, complete the EPA payment request form [EPA form 190-F-04-001](#) and fax it to LVFC at (702) 798-2423.

ASAP functions much like on-line banking. When EPA awards your grant, someone from an EPA Financial Management Office will contact you about how to enroll in ASAP, if you are not already enrolled. You will find information about enrolling in ASAP at: <http://www.fms.treas.gov/asap/>.

Once you are enrolled in the ASAP system, EPA will enter a spending authorization into the ASAP account. You will request payment through an on-line connection with ASAP. (If a financial institution is acting as the agent of your organization, that institution may request your payment through the Federal Reserve's FEDWIRE system.) Usually, you will receive your payment the next day or on a future specified day (up to 32 calendar days from the date of the payment request). When required, EPA will make same day payments.

Since EPA makes payments promptly, you should request payment only on a reimbursement basis, or in the case of an advance payment, only for the amount you need to meet immediate cash requirements. You should then disburse the funds as soon as possible after receiving them.

### ***Completing the ACH Vendor/Miscellaneous Payment Enrollment Form (SF 3881)***

To enroll in the ACH, you must complete the ACH Vendor/Miscellaneous Payment Enrollment Form (SF 3881) and submit it to the office specified in your approved TAG award agreement. A copy of SF 3881 is available in [Section 8, Blank Forms](#) of this manual.

The SF 3881 requires you to fill in information about EPA, your TAG group, and the financial institution where your group has its bank account (see 5.6 of this section for sample forms and instructions). After the SF 3881 is complete, make two copies of it. Keep one copy in your files, give one copy to the bank where your group has its account, and send the original to the office specified in your approved TAG award agreement.

## **5.3 Preparing Your Payment Request**

The procedures for requesting payment vary among EPA regions. In most regions, your group submits payment requests to the regional office or directly to an EPA Finance Center. In some regions, TAG recipients that use the ASAP system can make reimbursement requests electronically. Check with your EPA project officer/regional TAG coordinator to find out the payment procedure used by your region.

Regardless of where you submit your request, you must follow a few simple steps when preparing your payment request. Additional detail about each item follows the list below.

1. Make sure costs for which you are seeking reimbursement under the TAG are **allowable** (see below for definition), have been incurred during the funding period, and are documented in your records.
2. Collect invoices, receipts, and other documentation to support costs for which you want to be reimbursed, and for the required matching share.

3. Fill out the necessary paperwork, which will vary from region to region.
4. Submit your request for payment to the office and address specified in your TAG award agreement, or as instructed by your EPA project officer/regional TAG coordinator (if you are paid through ASAP).

### ***Make Sure Costs Are Allowable***

The principal cost incurred under the TAG will be paying for a contractor's services as your group's technical advisor. EPA can reimburse you only for costs that are **allowable** under federal regulations pertaining to the TAG program. These regulations include 2 CFR Part 230 and 40 CFR Part 35, Subpart M (see the [October 2, 2000, Federal Register Notice: Final Rule on Technical Assistance Grant Program](#)”).

To be **allowable**, costs must be:

- **Grant Related:** falling within the eligible activities approved by EPA in your TAG award agreement;
- **Allocable:** incurred specifically to achieve one or more of your project objectives;
- **Reasonable:** not exceeding, in their nature or amount, what would be incurred by a prudent person under circumstances prevailing at the time the costs are incurred; and
- **Necessary:** required for the operation of the organization or the successful performance of the award contract work.

See *Section 4, Procurement*, for information on how to analyze costs to ensure that they are allowable. Always keep a written record of your cost analyses in your files. In some cases, your EPA project officer/regional TAG coordinator may ask you to submit a copy of this record with your payment requests.

### ***Collect Supporting Documentation***

Your TAG filing system should contain all the documentation you need to prepare and submit TAG payment requests. This includes receipts for any purchases you have made, invoices and supporting documentation from your technical advisor and any other contractors, and a record of your matching share contributions. *Section 2, Tracking TAG Activities and Finances*, provides more information about setting up and maintaining a good filing system and provides worksheets for tracking monthly cash expenditures and matching share contributions. *Section 4, Procurement*, includes a description of the information that should be included in your contractor's invoice/billing package and maintained to support your requests for reimbursement. Your EPA project officer/regional TAG coordinator will tell you what specific documentation you need to submit to support your requests for payment.

### ***Fill Out Necessary Paperwork***

The paperwork required to request reimbursement for TAG costs and expenses varies among EPA regions. Some require Standard Form (SF) 270, "Request for Advance or Reimbursement," and others use the "U.S. EPA Payment Request" Form (EPA 190-F-04-001). Check with your EPA project officer/regional TAG coordinator to see which form is required.

Copies of SF-270 and the "U.S. EPA Payment Request" form are available in [Section 8, Blank Forms](#), of this manual, or you can download copies at: <http://www.epa.gov/ogd/forms/forms.htm>.

### ***Submit Your Payment Request***

Submit reimbursement requests to the office and address specified in your TAG award agreement. In most cases, you will send reimbursement requests either to your EPA regional office or to the

appropriate EPA Finance Center. If you are required to use the ASAP system, your EPA project officer/regional TAG coordinator will tell you how to get instructions for using the system.

Be sure to include all of the documentation that your EPA project officer/regional TAG coordinator has requested in support of your requests for payment. Remember that you also must keep this documentation in your files for the amount of time required by the TAG regulations (see *Section 2, Tracking TAG Activities and Finances*).

You should submit a reimbursement request at least quarterly, if you have incurred any costs during that period that need to be paid with federal funds, but reimbursement requests may be submitted as often as monthly, if your group has reimbursable expenses that exceed \$500.

Your EPA project officer/regional TAG coordinator will review your reimbursement request to determine compliance with the terms of your TAG award agreement, and approve payment. He or she must determine that:

- Tasks are being done according to your group's approved statement of work;
- Activities submitted for reimbursement are eligible and allowable according to 40 CFR 35.4070 of the TAG rule, EPA's general grant regulations, and OMB Circular A-122 requirements; and
- Your group has complied with the terms and conditions of your approved TAG award agreement, including all federal reporting requirements.

Your payment will be approved if your project is progressing satisfactorily and all the conditions above have been met. Once your request is approved, EPA will issue payment. If there are unallowable costs or other questions, your EPA project officer/regional TAG coordinator will not approve your request. He or she may contact you for more information or clarification and may ask you to amend your request. In some cases where payments are automatically approved, you may receive the full amount requested, but any questionable costs may be identified later by EPA and reconciled when the next reimbursement request is submitted. If you continually request reimbursement for questionable or undocumented costs, your EPA project officer/regional TAG coordinator may recommend that sanctions be imposed.

## 5.5 Paying Your Contractor

Because TAGs are reimbursement grants, your technical advisor must bill you for completed work before EPA can reimburse your group with the money to pay him or her. EPA recommends that, when possible, you wait to pay your contractors until the reimbursement has been received. That's why it is important to request reimbursement in a timely manner whenever you have incurred costs or received a bill from your contractor (see *Section 4, Procurement*). This practice will save your group from spending its own money on contractor costs.

When you receive a reimbursement from EPA, promptly pay any outstanding invoices, including those from your technical advisor or other contractors. Prompt payment helps ensure that your technical advisor's work continues at the pace expected and that your group is seen as financially responsible.

## 5.6 Sample Forms and Instructions

The following pages include sample forms and instructions for filling out Standard Form SF-3881, ACH Vendor/Miscellaneous Payment Enrollment Form; Standard Form SF-270, Request for Advance or Reimbursement; and EPA-190-F-04-001, U.S. EPA Payment Request. If you have been notified that you are required to use the new ASAP system, your EPA project officer/regional TAG coordinator will provide you with instructions for obtaining and completing the required paperwork.

## ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

OMB No. 1510-0056  
Expiration Date 07/31/09

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

### PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

### AGENCY INFORMATION

FEDERAL PROGRAM AGENCY		
AGENCY IDENTIFIER:	AGENCY LOCATION CODE (ALC):	ACH FORMAT: <input type="checkbox"/> CCD+ <input type="checkbox"/> CTX
ADDRESS:		
CONTACT PERSON NAME:		TELEPHONE NUMBER: (       )
ADDITIONAL INFORMATION:		

### PAYEE/COMPANY INFORMATION

NAME: <b>Woodtown Landfill Coalition</b>	SSN NO. OR TAXPAYER ID NO.: <b>02-1234567</b>
ADDRESS: <b>1 Main Street</b>	
<b>Litchfield, CT 06898</b>	
CONTACT PERSON NAME: <b>Pat Jones, Executive Director</b>	TELEPHONE NUMBER: ( <b>203</b> ) <b>123-0400</b>

### FINANCIAL INSTITUTION INFORMATION

NAME:	
ADDRESS:	
ACH COORDINATOR NAME:	TELEPHONE NUMBER: (       )
NINE-DIGIT ROUTING TRANSIT NUMBER: _____	
DEPOSITOR ACCOUNT TITLE:	
DEPOSITOR ACCOUNT NUMBER:	LOCKBOX NUMBER:
TYPE OF ACCOUNT: <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOCKBOX	
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL: (Could be the same as ACH Coordinator)	TELEPHONE NUMBER: (       )

NSN 7540-01-274-9925

3881-102  
**AGENCY COPY**

SF 3881 (Rev 12/90)  
Prescribed by Department of Treasury  
31 U S C 3322; 31 CFR 210

## Instructions for Completing SF 3881

1. Agency Information: To obtain the information necessary to complete this section of the SF 3881, contact your EPA project officer/regional TAG coordinator.
2. Payee Information:
  - Name: Enter the name of your group as it is shown in your approved TAG award agreement.
  - SSN No. Or Taxpayer ID No.: Enter your group's employer identification number (EIN).
  - Address: Enter the full mailing address of your group as it is shown in your approved TAG award agreement. Also include your group's primary email address if you have one.
  - Contact Person Name: Enter the name of your group's authorized representative.
  - Telephone Number: Enter the area code and phone number of your authorized representative.
3. Financial Institution Information:
  - Name: Enter the name of the bank where your group has its account.
  - Address: Enter the full mailing address of the bank where your group has its account.
  - To obtain the remaining information necessary to complete this section of the SF 3881, take the SF 3881 to the bank where your group has its account and ask an official to provide the information. Make sure the bank official signs the form in blue ink.

<b>REQUEST FOR ADVANCE OR REIMBURSEMENT</b>  (See instructions on back)		OMB APPROVAL NO. 0348-004		PAGE 1	OF 1 PAGES
		1. TYPE OF PAYMENT REQUESTED	a. "X" one or both boxes ADVANCE <input type="checkbox"/> REIMBURSEMENT <input checked="" type="checkbox"/>		2. BASIS OF REQUEST  <input checked="" type="checkbox"/> CASH  <input type="checkbox"/> ACCRUAL
b. "X" the applicable box  <input type="checkbox"/> FINAL <input checked="" type="checkbox"/> PARTIAL					
3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED  U.S. EPA Region 1		4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY  1-900000-01-0		5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST.  4	
6. EMPLOYER IDENTIFICATION NUMBER  02-1234567	7. RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER	8. PERIOD COVERED BY THIS REQUEST			
		From (month, day, year) 1/1/2005		TO (month, day, year) 3/31/2005	
9. RECIPIENT ORGANIZATION  Name: Woodtown Landfill Coalition  Number 1 Main Street and Street:  City, State and ZIP Code: Litchfield, CT 06898		10. PAYEE (Where check is to be sent if different than item 9)  Name: Woodtown Landfill Coalition  Number 1 Main Street and Street:  City, State and ZIP Code: Litchfield, CT 06898			
<b>11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED</b>					
PROGRAMS/FUNCTIONS/ACTIVITIES		(a)	(b)	(c)	TOTAL
a. Total program (As of date) Outlays to date		\$ 52,694.02	\$	\$	\$ 52,694.02
b. Less: Cumulative program income					0.00
c. Net program outlays (Line a minus line b)		52,694.02	0.00	0.00	52,694.02
d. Estimated net cash outlays for advance period					0.00
e. Total (Sum of lines c & d)		52,694.02	0.00	0.00	52,694.02
f. Non-Federal share of amount on line e		10,538.80			10,538.80
g. Federal share of amount on line e		42,155.20			42,155.20
h. Federal payments previously requested		30,000.00			30,000.00
i. Federal share now requested (Line g minus line h)		12,155.20	0.00	0.00	12,155.20
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances	1 <sup>st</sup> month				0.00
	2 <sup>nd</sup> month				0.00
	3 <sup>rd</sup> month				0.00
<b>12. ALTERNATE COMPUTATION FOR ADVANCES ONLY</b>					
a. Estimated Federal cash outlays that will be made during period covered by the advance					\$
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period					
c. Amount requested (Line a minus line b)					\$ 0.00

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(Continued on Reverse)

STANDARD FORM 270 (Rev. 7-97)  
Prescribed by OMB Circulars A-102 and A-110

## SF 270 – Request for Advance or Reimbursement

Complete the “Page \_\_\_ of \_\_\_” pages block in the upper right corner.

1. *Type of Payment Requested*—

- a. Place an X in the first box (beside ADVANCE) only if you are requesting a one-time advance payment. Place a X in the second box (beside REIMBURSEMENT) if you are requesting reimbursement for incurred TAG costs and expenses.
- b. Place an X in the first box **only** if this is your last request for payment; otherwise, place an X in the second box, beside PARTIAL.

2. *Basis of Request*—Place an X next to CASH

3. *Federal Sponsoring Agency and Organization Element To Which This Report Is Submitted*—Enter U.S. EPA Region (insert correct number).

4. *Federal Grant or Other Identifying Number Assigned by Federal Agency*—Enter the federal grant number specified on your TAG award agreement. This number is called the Assistance ID Number.

5. *Partial Payment Request Number for This Request*—Enter the number of this reimbursement request. If this is your first request for reimbursement, the number should be 1. If this is not your first request, enter the number that follows the number in Block 5 of the last Request for Advance or Reimbursement form (Standard Form 270) you submitted.

6. *Employer Identification Number*—Enter your TAG group’s employer identification number (EIN) that you received from the U.S. Internal Revenue Service prior to applying for your TAG.

7. *Recipient’s Account Number or Identifying Number*—If you have assigned an internal account number to your TAG that is different from the grant number assigned by EPA, enter it here. Otherwise, leave this box blank.

8. *Period Covered by This Request*—If this is a request for a one-time advance payment, enter the period that the advance will cover (the beginning month, day, and year in the “FROM” box; the ending month day, and year in the “TO” box). In all other cases, enter the time period for which you are requesting reimbursement. The time period (typically a month or a calendar quarter) depends on how often you request reimbursement, and needs to correspond with any backup documentation submitted along with the payment request.

9. *Recipient Organization*—Enter name and full mailing address of your group, as it appears on your TAG award agreement.

10. *Payee*—Enter the name and full mailing address for your TAG group as it appears in your TAG award agreement.

11. *Computation of Amount of Reimbursements/Advances Requested*—If you are required to fill out this portion of the form, enter the appropriate amounts in vertical column (a). (**NOTE:** If your TAG award agreement has multiple budget tables (for example, if it is for multiple sites), use the vertical columns (a), (b), and (c) for each of the budgets.)

- a. Enter the date you wrote in the “TO” box in Item 8 of this form under “As of date” in the left-hand box on this line.

**If this is a one-time advance payment request**, do not fill in any amounts on this line; skip to line d.

***If this is not a one-time advance payment request***, enter the final amount in the “Cumulative Outlays” column from the Summary of Outlays to Date worksheet provided in *Section 2, Tracking TAG Activities and Finances*, of this manual.

- b. Enter a zero (0) on this line. (**NOTE:** Income/cash contributions are not program income in the grant regulations sense. The cash contributions that TAG groups receive can only be counted as matching share **after** the money is spent on something eligible under the TAG. Then the amount **spent** (cash expenditures) can be counted as part of the matching share.)
- c. Enter the amount from line a on line c.
- d. ***If this is a one-time advance payment request***, enter the amount of the advance you are requesting in the “Total” column on line d. ***If this is not a request for an advance***, skip this line.
- e. Add the amount on line c. to the amount, if any, on line d, and enter the totals on line e.
- f. Multiply the amount on line e. by the percentage shown as the non-federal share in your TAG award agreement and enter the resulting amount on line f. The non-federal share is usually 20 percent, unless your group has been granted a waiver. If your group was granted a full waiver of the matching-share requirement, enter zero here. If your group received a partial waiver, enter the appropriate percentage of matching share specified in your TAG award agreement here.
- g. Multiply the amount on line e. by the percentage shown as the federal share in your TAG award agreement and enter the resulting amount on line g. The federal share is usually 80 percent, unless your group was granted a waiver. If your group was granted a full waiver of the matching-share requirement, enter 100 percent here. If your group received a partial waiver, enter the appropriate percentage of federal share specified in your TAG award agreement here.
- h. Enter the total of all federal payment amounts you have requested to date, if any, on line h.
- i. Subtract the amount on line h. from the amount on line g. and enter the remainder on line i.
- j. Skip this line. TAG recipients can only request a one-time advance payment.



## Instructions for Completing the U.S. EPA Payment Request (EPA-I90-F-04-001)

<i>Recipient Name:</i>	Enter the full name and mailing address for your group as it appears on your approved TAG award agreement.
<i>Contact Person:</i>	Enter the name of your TAG group's authorized representative.
<i>Fax #:</i>	Enter the fax number for your TAG group's authorized representative.
<i>Phone #:</i>	Enter the telephone number for your TAG group's authorized representative.
<i>Email address:</i>	Enter the email address, if any, for your TAG group's authorized representative.
<i>EFT#:</i>	Enter the electronic funds transfer number assigned when you enrolled in the ACH system.
<i>Request #:</i>	<b>If this is your first payment request</b> , enter 1. <b>If this is <u>not</u> your first request</b> , enter the number that follows the number on your last request.
<i>Cash on Hand \$:</i>	Your TAG group should have no cash on hand, unless you have not used all of an approved one-time advance payment. In this case, check with your EPA project officer/regional TAG coordinator about what to enter.
<i>Assistance Agreement:</i>	Enter the federal grant number specified on your approved TAG award agreement. This number is called the Assistance ID Number.
<i>Account No/Activity Code</i>	Leave this blank or get the appropriate number from your EPA project officer/regional TAG coordinator.
<i>\$ Amount:</i>	Enter the amount of reimbursement you are requesting. Be sure to attach the Nonfederal Cash Expenditures, In-kind Contributions, and Summary of Outlays to Date worksheets (from <i>Section 2, Tracking TAG Activities and Finances</i> , of this manual) showing how you calculated this amount, and documentation of all expenditures to be reimbursed.
<i>Mark (X) if Credit:</i>	<b>This item applies only if you have had an overpayment.</b> In this case, ask your EPA project officer/regional TAG coordinator what to enter here.
<i>Total Amount Requested \$:</i>	Enter the total amount for which you are requesting reimbursement.
<i>Approvals:</i>	Your TAG group's authorized representative must sign and date this form on the first line of this section of the form.

## 5.7 Checklist: Obtaining and Using TAG Funds

*(This checklist is a reminder to read and follow the full instructions provided throughout this section. Appropriate sub-sections are shown so you can easily reference this important information.)*

- Determine whether you need a one-time advance payment (see 5.1). If you need an advance payment and an advance payment was not included in your TAG award agreement, contact your EPA project officer/regional TAG coordinator to see if your TAG can be formally amended to include it.
- Enroll in the Automated Clearing House (ACH) network to receive payment by direct deposit/ electronic funds transfer, or enroll in the Automated Standard Application for Payment (ASAP) if your EPA region requires it (see 5.2 and 5.6).
- Before preparing your payment request, make sure that all costs for which you are seeking reimbursement are allowable under TAG and other regulations (see 5.3).
- Collect all documentation necessary to support costs for which you are seeking reimbursement (see Section 5.3) and to support the required matching share contribution.
- Fill out the request for payment forms specified by your EPA region (see 5.3 and 5.6).
- Submit your payment request and all necessary documentation to the address specified in your TAG award agreement, or, if using the ASAP system, to the location specified by your EPA project officer/regional TAG coordinator (see 5.4).
- After receiving payment from EPA, pay your contractors promptly (see 5.5).