Supplemental Instructions for Use when Completing
SF424, APPLICATION FOR FEDERAL ASSISTANCE

Block 1. TYPE OF SUBMISSION:
- ➢ Check the Non-Construction block in the **"Application"** section. The B-WET Program does not accept construction projects.
- ➢ Leave the pre-application box empty. At this time, the B-WET Program is not accepting pre-applications.

Block 2. DATE SUBMITTED:
- ➢ The date submitted to the Federal agency is very important and if not completed will delay processing of the application.
- ➢ Please enter your organization's applicant or state identifier, if applicable.

Block 3. DATE RECEIVED BY STATE:
For state applicants in states that require submission to a State Single Point of Contact (SPOC), indicate here the date that the application was received by the state. You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance. Contact your state SPOC to determine whether or not your state requires review and clearance. If SPOC clearance is required, you are responsible for getting that clearance in time to submit your application by the published deadline.

Block 4. DATE RECEIVED BY FEDERAL AGENCY:
NOAA will enter date upon receipt.

Block 5. APPLICANT INFORMATION:
- ➢ **Legal Name**: Enter Name of Organization NOT Principal Investigator
- ➢ **Organization Unit or Department**: Enter Sub- unit of Organization identified above if applicable.
- ➢ **Organizational DUNS**: Enter your organization's Data Universal Numbering System number. To obtain a DUNS number call 1-866-705-5711. For more information regarding the DUNS, please visit http://www.ofa.noaa.gov/%7Egrants/DUNS.pdf
- ➢ **Address**: Enter address including city, county, state, and zip
- ➢ **Contact Person(s):** Provide name and telephone number of person responsible for completion of the application forms and budget. Also provide email address if available as this is helpful during the review process if there are questions or issues to be resolved.

Block 6. EMPLOYER IDENTIFICATION NUMBER:
Number assigned by Internal Revenue Service as your organization's tax identification number. Obtain from your employer/business office. It is important that an accurate number is provided as this is used for identification purposes, drawing down funds, and reporting to the IRS.

Block 7. TYPE OF APPLICANT:
Please refer to the instructions found on the back of the SF-424 for types of applicants.

Block 8. TYPE OF APPLICATION:
- ➢ **New**: New award
- ➢ **Continuation**: Additional funding to continue activities of an existing award and usually involves an extension to the project period.
- ➢ **Revision**: Any change in the Federal Government's financial obligation or contingent liability from an existing obligation.

Block 9. NAME OF FEDERAL AGENCY:
Insert: NOAA

Block 10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER (CFDA):
- ➢ Insert: 11.429 if you are applying to the B-WET Program in the Monterey Bay watershed
- ➢ Insert: 11.473 for applicants applying to the B-WET Program in the Hawaii Islands

Title (Name of Program):
- ➢ Enter Marine Sanctuary Program for B-WET Program Monterey Bay watershed
- ➢ Enter Coastal Services Center for the B-WET Program in the Hawaiian Islands

Block 11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:
Use key words. Provide a concise description.

Block 12. AREAS AFFECTED BY PROJECT:
Self-Explanatory

Block 13. PROPOSED PROJECT START DATE:
The project period MUST begin on the first day of the month and end on the last day of the month. Projects should not begin before the date given in the Federal Register Notice announcement. Typical project periods are one year in duration. Pay attention to accuracy of dates as incorrect years/typos cause delays in processing of application. **If you are submitting an application with the intent to request continuation beyond the first year, the project period should reflect only one year at a time.**

Block 14. CONGRESSIONAL DISTRICTS:
- ➢ **Applicant**: The congressional district of your organization based on address provided on SF-424.
- ➢ **Project**: The congressional district based on address/location of work being done.

You can obtain this information at http://www.congress.org, to conduct a zip code search of congressional districts.

Block 15. ESTIMATED FUNDING:
The estimated amount of funding should reflect the amount required to conduct the project within the project period (one year). If you are submitting your proposal with intent to continue beyond the first year, include only the amount requested for one year. Include the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. All information must correspond with the required SF-424A, Budget Form.

Block 16. STATE EXECUTIVE ORDER: For State applicants only.
All state applicants must enter either "a. YES" or "b. NO", or "program has not been selected by state for review". Contact your state single point of contact (SPOC) to determine whether or not your state requires review and clearance of the application. If SPOC clearance is required, you are responsible for getting that clearance in time to submit you application by the published deadline. You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance.

Block 17. FEDERAL DEBTS:
Do not leave blank. Refers to the organization, not the applicant.

Block 18. SIGNATURES:
Must be signed by legal applicant and dated. (Authorizing signature of Organization performing work or responsible for performance of work.)