

# U.S. Fish and Wildlife Service

## Request for Exception to Cost Recovery Policy

Date: \_\_\_\_\_ Requesting Organization: \_\_\_\_\_

Regional/Program Contact: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Cooperator Name: \_\_\_\_\_

Cost Structure(s): \_\_\_\_\_

Total Agreement Amount: \_\_\_\_\_

Total Exemptions (see Cost Study): \_\_\_\_\_

Project Description:

Exception Justification:

### **REGIONAL APPROVAL:**

(Not required for Washington Office requests)

\_\_\_\_\_  
**Program ARD**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**ARD/Budget & Administration**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Regional Director**

\_\_\_\_\_  
**Date**

**Exception to Policy Approved:**

or

**Applicable Rate:**

**%**

**YES**

**NO**

\_\_\_\_\_

**Approval/Disapproval Justification:**

**WASHINGTON APPROVAL:**

\_\_\_\_\_  
**Chief, Division of Finance**                      **Date**

\_\_\_\_\_  
**Chief, Division of Budget**                      **Date**

\_\_\_\_\_  
**Assistant Director - Budget, Planning & Human Resources**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Assistant Director - Business Management & Operations**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Assistant Director -**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Director, U.S. Fish and Wildlife Service**

\_\_\_\_\_  
**Date**

**Exception to Service Policy Cost Study**

**1. Total Direct Costs** \$

**Indirect Costs** (Contact the Division of Finance for Assistance)

- Office Space \$
- Telephone
- Postage
- Printing
- Accounting System
- Payroll/Personnel System
- Procurement System
- Worker's Compensation
- Unemployment
- Regional Program Support
- Headquarters' Program Support
- Regional Administration
- Headquarters' Administration

**2. Total Indirect Costs** \$

Proposed Exemptions \$

**3. Total Exemptions** (\$ )

**4. Adjusted Indirect Costs** (Line 2 minus Line 3) \$

**Full Cost  
Recovery Rate**  
(Line 2 divided by Line 1)

**Proposed Cost  
Recovery Rate**  
(Line 4 divided by Line 1)