

**DEPARTMENT OF THE INTERIOR  
NATURAL RESOURCE DAMAGE ASSESSMENT AND RESTORATION FUND  
REQUEST FOR ADVANCE ASSESSMENT FUNDING (with PRP agreement)**

**Case Name:**  
**Date of Request:**  
**Summary of Needs:**

**Amount of Request:**  
**Bureau:**  
**Bureau Contact (and phone number):**  
**Responsible Party:**  
**Bureau Account Number:**

**Proposed NRDA Action Budget (by quarter):**  
**1-3 months:**  
**4-6 months:**  
**7-9 months:**  
**10-12 months:**

**I certify, that this budget is required for the work outlined in the attached signed MOA and that the Responsible Party (RP) has agreed that they will accept responsibility to repay allowable incurred costs to the Department for these obligations.**

\_\_\_\_\_  
**Authorized Official**

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

\_\_\_\_\_  
**NRDAR Work Group Member**

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

**I certify that funds are sufficient to cover the amount of requested funds agreed to by the bureau and the Responsible Party, and, are currently available in the DOI-NRDAR Fund.**

\_\_\_\_\_  
**NRDAR Fund Manager**

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

**This application complies with established procedures,**

\_\_\_\_\_  
**Chair, NRDAR Fund Task Force**

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