



U.S. Department of the Interior
Departmental Offices (DO)/Office of the Secretary
(ALC 14010001)
ASAP.GOV Participation Request

Instruction: Recipient should complete this form and email completed form to do_spoc@ios.doi.gov.
*Fields marked with * are required. Failure to provide required data may result in delayed enrollment.*

Upon ASAP enrollment by DO,

- New ASAP Recipient, POC for recipient will receive an email from ASAP with the User ID and password information. Recipient will need to complete their ASAP enrollment within 45 days of email receipt.
- Existing ASAP Recipient (enrolled with another Bureau/Agency), POC will receive an email informing them DO has initiated an enrollment and Financial Official receives email instructing them to link their existing banking.

Questions: Email do_spoc@ios.doi.gov

Organization Information

*Organization Name:			
*UEI: Unique Entity Identifier 12 Alphanumeric Characters		*TIN/EIN: Nine Digit Number	
ASAP ID: Provide if enrolled in ASAP with another Federal Agency			
*Mailing Address:			
*City:			
*State:		*Zip Code:	
*Phone:			

Point of Contact Information

(Individual responsible for receiving ASAP Communications)

*First Name:		Middle Initial:	
*Last Name:			
Title:			
*Email:			

*** Organization Type**

(Choose the category that is registered under the organizations' Taxpayer ID number (TIN))

Financial Institution For-Profit Indian Tribal Organization Local Government Non-Profit	Other Educational Organization State Agency University / College University / College - State
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Privacy Statement

Collection of the information in this form is authorized by 31 CFR 209 and/or 210, 5 U.S.C. § 552a, 31 U.S.C. § 3332(g), and Executive Order 9397 (November 22, 1943). Your social security number and/or DUNs/EIN/TIN and the other information requested will allow the federal government to process your ASAP financial assistance payments. Your social security number and/or DUNs/EIN/TIN is requested to ensure the accurate identification and retention of records pertaining to you and to distinguish you from other recipients of federal payments. This information will be disclosed to the Department of the Treasury and its fiscal and financial agents, and other federal agencies, as necessary to process your payments. This information may also be disclosed to a court, congressional committee or another government agency as authorized or required to verify your receipt of federal payments. Although providing the requested information is voluntary, your payment cannot be processed without it. The information is confidential and is needed to prove entitlement to payments. The information will be used to process payment data from the Recipient to the financial institution and/or its agent.