

IAA Form Preparation Information

18F created this form to expedite the Inter-Agency Agreement process, and provide information for the creation of Forms 7600A and 7600B. Please complete all questions before submitting the form. Many questions are required.

*** Required**

1. Requesting Agency IAA Number *

Each Requesting Agency should establish the IAA Number. Please enter your agencies IAA number for this IAA. If there is no agency IAA #, enter N/A.

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2. Agency Name (Box 1-Form 7600A) *

Enter the Department and/or Agency names of the Requesting Agency. (The specific Office name will be captured in the Order.)

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3. Agency Address (Box 1-Form 7600A) *

Enter the Requesting Agency's mailing address.

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4. Primary Organization/Office Name (Box 24-Form 7600B) *

Enter the name of the primary organization /office within both the Requesting Agency that is directly responsible for requesting the product(s)/service(s) for this Order.

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5. Responsible Organization/Office Address (Box 24-Form 7600B) *

Enter the address of the primary office/organization within both the Requesting Agency that is directly responsible for this order.

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6. Project Title/Name *

Enter the name of the project title.

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Financial Information

Please provide the following financial information to complete Form 7600B.

7. Statutory Authority (Box 10 - Form 7600A) *

Identify the Requesting Agency's statutory authority for this IAA.
Mark only one oval.

- ☐ Franchise Fund
- ☐ Revolving Fund
- ☐ Working Capital Fund
- ☐ Economy Act (31 U.S.C. 1535/FAR 17.5)
- ☐ Other:

8. Statutory Authority Title and Citation (Box 10 - Form 7600A)

If not Economy Act, cite the Statutory Authority
with a US Code Citation and Title

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9. Requesting Agency Funding Expiration Date (Box 28 - FORM 7600B) *

Enter the date (Month, Day, Year) when the Requesting Agency's funds for this Order Line
expire (the last date an obligation can occur). This does not apply to No-Year Funds.

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Example: December 15, 2012

10. Requesting Agency Funding Cancellation Date (Box 28 - FORM 7600B) *

Enter the date (Month, Day, Year) that the Requesting Agency's funds will cancel for this
Order Line. The cancellation date is the fifth year from the expiration date (the last date the
payment must be disbursed).

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Example: December 15, 2012

11. Agency Location Code (ALC) (Box 28 - FORM 7600B) *

Enter the Requesting Agency's Location Code
(See
<http://www.fms.treas.gov/TFM/vol1/v1p2c330.html>).
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12. Component TAS Number *

Enter the Requesting Agency's Component TAS format (See <http://www.fms.treas.gov/TFM/vol1/v1p2c330.html>).

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13. Business Type Event Code (BETC) (Box 28 - FORM 7600B) (Box 28 - FORM 7600B) *

Enter one BETC for each line for the Requesting Agency. The BETC must be related to the TAS (see http://www.fms.treas.gov/gwa/factsheet_betc.html).

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14. Object Class Code (optional) (Box 28 - FORM 7600B)

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15. Business Partner Number (BPN) (Box 28 - FORM 7600B) *

Enter the Requesting Agency's Business Partner Number (BPN) (see <http://www.bpn.gov/> and <https://www.bpn.gov/far>.) Note: BPN is the standard name for this data element; however, this may be a trading partner's DUNS or the Department of Defense Activity Address Code (DoDAAC).

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16. Business Partner Number +4 (BPN+4) (optional) (Box 28 - FORM 7600B)

Enter the Requesting Agency's BPN + 4. Note: BPN + 4 is the standard name for this data element, however, this may be a trading partner's DUNS + 4 or the Department of Defense Activity Address Code (DoDAAC) + 4.

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17. Additional Accounting Classification/Information (optional) (Box 28 - FORM 7600B)

Enter additional important accounting information used for internal tracking for the Requesting Agency.

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18. Project Number and Title (Box 28 - FORM 7600B) *

Enter the Requesting Agency's project number and title.

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Requesting Agency Program Official (Box 37 - FORM 7600B)

The Program Official, as identified by the Requesting Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.

19. Program Official Name *

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20. Title *

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21. Telephone Number

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22. Email Address *

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Funding Official (Box 38 - FORM 7600B)

The Funds Approving Official, as identified by the Requesting Agency, who will certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order.

23. Funding Official Name *

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24. Title *

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25. Telephone Number

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26. Email Address *

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Finance Office Point of Contact (Box 39 - FORM 7600B)

The Finance Office POCs for the Requesting Agency must ensure that the payment (Requesting Agency) are accurate and timely for this Order. Enter this person's information.

27. Finance POC Name *

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28. Title *

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29. Office Address *

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30. Telephone Number *

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31. Email Address *

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Additional Points of Contacts (Optional) (Box 40 - FORM 7600B)

If there are any additional POCs, please enter their Name, Title, Office Address, Telephone Number, Fax Number, and Email Address in the space provided.

32. Additional Point of Contact #1

Please include name, title, email, and phone number.

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33. **Additional Point of Contact #2**

Please include name, title, email, and phone number.

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