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| **Applicant:** |
| **Application Control Number:**  |

*INSTRUCTIONS: The Applicant (i.e. the Lead Prime Recipient or the Lead Lab) is required to provide and submit the information requested in this form with the Full Application on behalf of the Project Team. Alternatively, the Applicant may submit this form on its own behalf and append separate forms completed by each Project Team member. ARPA-E strongly encourages Applicants to use this template. Additional instructions are provided below. A sample response to this form is available on ARPA-E eXCHANGE (*[*https://arpa-e-foa.energy.gov*](https://arpa-e-foa.energy.gov)*).*

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| **Certification:** I certify under penalty of perjury that the information contained in this disclosure form is accurate and complete. I understand that false statements or misrepresentations may result in civil and/or criminal penalties under 18 U.S.C. § 1001. |
| **Applicant’s Authorized Representative:**      **Date:**       | **Principal Investigator:**      **Date:**       |

1. **RESPONSIBILITY DISCLOSURES:** Mandatory. No page limit. The Applicant is required to disclose if any of the following conditions exist. If the answer to any of the questions in this Section is “Yes,” the Applicant is required to provide a detailed explanation in the space below.
	1. **Has the Applicant or any of its principals[[1]](#footnote-2) been convicted of a covered offense[[2]](#footnote-3) in the last three years or had a civil judgment rendered against them for one of those offenses in that time period?**

YES [ ] NO [ ]

* 1. **Is the Applicant or any of its principals presently excluded[[3]](#footnote-4) or disqualified[[4]](#footnote-5) from participation in Federal programs or activities?**

YES [ ] NO [ ]

* 1. **Is the Applicant or any of its principals presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of a covered offense?**

YES [ ] NO [ ]

* 1. **Has the Applicant or any of its principals had one or more transactions with governmental entities (Federal, State, or local) terminated within the preceding three years for cause, default, or material noncompliance?**

YES [ ] NO [ ]

* 1. **If a corporation, has the Applicant been convicted of any felony criminal violation under any Federal law within the preceding two years?**

YES [ ] NO [ ]  N/A (not a corporation) [ ]

* 1. **If a corporation, does the Applicant have any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with an authority responsible for collecting the tax liability?**

YES [ ] NO [ ]  N/A (not a corporation) [ ]

**If the answer to any of the above questions is “Yes,” please use the space below to provide a detailed explanation.**

1. **ADDITIONALITY AND RISKS:** Mandatory. 4 pages maximum. The Applicant must provide a narrative response to each question below.
	1. **Describe the technical and market risks associated with the proposed R&D project.**

* 1. **Describe why the Applicant and/or other members of the Project Team need ARPA-E funding for the proposed R&D project, relative to other funding sources.**[[5]](#footnote-6)
* If the Applicant is a large business, describe why this R&D project is not being sponsored internally.
* If the Applicant is a small business sponsored by private investors, identify the types of private investors that have supported your business and explain why this R&D project is not being supported by the private investors.
* If the Applicant is a small business not sponsored by private investors, describe why this R&D project has been unable to attract private financing.
* If the Applicant is a university, nonprofit, or national laboratory, describe the institutional or other resources that may be leveraged, and explain why these resources have not been available to date.

* 1. **Describe how, if successful, the proposed R&D project may provide a benefit to the United States (e.g., increased employment in the domestic energy sector, increased domestic manufacturing of novel energy technologies).**

1. **PENDING AND CURRENT SOURCES OF FUNDING.** Mandatory. No page limit.
2. Does the **Applicant or any other member(s) of the Project Team** (including, without limitation, the PI or any Co-PI(s)),have any applications for **this project** or for **related work** (i.e., work that relates directly or indirectly to the proposed R&D project) pending with any **Federal or non-Federal entity** (including, without limitation, industry, private investors, and foreign, state, or local governments)?

 YES [ ] NO [ ]

If “Yes,” complete the following tables. If additional tables are required, please include the tables in an addendum to this form.

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| **Source of Funding #1:**       |
| **Date of Submission:**       |
| **Title of Submission:**       |
| **Application Status:**       |
| **Abstract for Project:**       |

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| **Source of Funding #2:**       |
| **Date of Submission:**       |
| **Title of Submission:**       |
| **Application Status:**       |
| **Abstract for Project:**       |

1. The Applicant is required to disclose **all funding from any Federal or non-Federal entity** that the **Applicant or any other member(s) of the Project Team** (including, without limitation, the PI or any Co-PI(s)),are **currently receiving or have received within the last 5 years** in the same technology area as the proposed R&D project. Complete a separate table for each source of funding. If additional tables are required, please include the tables in an addendum to this form. If the Applicant and all members of the Project Team have not received any such funding, check the box marked “None” below.

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| **If NONE, check here** **[ ]**  |

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| **Entity #1:**       |
| **Point of Contact Name and Title:**       |
| **Point of Contact Telephone:**       |
| **Point of Contact Email Address:**       |
| **Point of Contact Postal Address:**       |
| **Title of Project:**       |
| **Funding Amount:**       |
| **Non-Federal Cost Share Amount (If Applicable):**       |
| **Start and End Dates:**       |
| **Abstract for Project:**       |

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| **Entity #2:**       |
| **Point of Contact Name and Title:**       |
| **Point of Contact Telephone:**       |
| **Point of Contact Email Address:**       |
| **Point of Contact Postal Address:**       |
| **Title of Project:**       |
| **Funding Amount:**       |
| **Non-Federal Cost Share Amount (If Applicable):**       |
| **Start and End Dates:**       |
| **Abstract for Project:**       |

1. **POTENTIAL CONFLICTS OF INTEREST WITHIN PROJECT TEAM:** Mandatory. No page limit. The Applicant is required to disclose potential conflicts of interest within the Project Team. An apparent or actual conflict of interest may exist where an individual or entity has different, and potentially conflicting, duties or relationships with respect to other individuals or entities within the Project Team. Complete a separate table for each potential conflict of interest. If additional tables are required, include the tables in an addendum to this form. If no conflicts of interest exist, check the box marked “None” below. Examples of potential conflicts of interest include but are not limited to:
* The PI for the Prime Recipient has an equity stake in a Subrecipient;
* The PI for a Subrecipient has a consulting arrangement with the Prime Recipient; or
* A Subrecipient is a subsidiary of or is otherwise affiliated with the Prime Recipient.

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| **If NONE, check here** **[ ]**  |

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| **Conflicted Individual or Entity #1:**       |
| **Description of Potential Conflict of Interest:**       |

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| **Conflicted Individual or Entity #2:**       |
| **Description of Potential Conflict of Interest:**       |

1. **WAIVER REQUEST – FOREIGN WORK** (see Section IV.G.6 of the FOA)**:** Optional. No page limit. ARPA-E requires all work to be performed in the United States. Applicants may request a waiver of this requirement if they wish to perform some work overseas. Complete a separate table for each entity that is requesting to perform work overseas. If additional tables are required, include the tables in an addendum to this form. If no work will be performed overseas, check the box marked “Not Applicable” below.

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| **If NOT APPLICABLE, check here [ ]**  |

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| **Entity #1:**       |
| **Countries in Which Work Will Be Performed :**       |
| **Description of Work to Be Performed:**       |
| **Rationale for Performing Work Overseas:**       |

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| **Entity #2:**       |
| **Countries in Which Work Will Be Performed :**       |
| **Description of Work to Be Performed:**       |
| **Rationale for Performing Work Overseas:**       |

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| **Entity #3:**       |
| **Countries in Which Work Will Be Performed :**       |
| **Description of Work to Be Performed:**       |
| **Rationale for Performing Work Overseas:**       |

1. **WAIVER REQUEST – TECHNOLOGY TRANSFER AND OUTREACH COSTS** (see Section IV.G.8 of the FOA)**:** Optional. No page limit. ARPA-E requires Applicants to spend at least 5% of ARPA-E funding on Technology Transfer and Outreach (TT&O) activities. Applicants may request a waiver of this requirement in whole or in part. If the Applicant is seeking a waiver, please provide the information in the table below. If the Applicant is not seeking a waiver, check the box marked “Not Applicable” below.

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| **If NOT APPLICABLE, check here [ ]**  |

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| **Proposed % to Be Spent on TT&O Activities:**       |
| **Rationale for Waiver Request :**       |

1. **FFRDC AUTHORIZATION** (see Section II.B.2 of the FOA)**:**  Mandatory for FFRDCs only. No page limit. Before submitting a Full Application, DOE/NNSA FFRDCs are required to obtain written authorization from the cognizant DOE/NNSA contracting officer. Non-DOE/NNSA FFRDCs are required to obtain written authorization from the cognizant Federal agency sponsoring the FFRDC. If the Applicant is not a FFRDC, check the box marked “Not Applicable” below.

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| **If NOT APPLICABLE, check here [ ]**  |

The written authorization must be appended to this form and be signed and dated by the authorizing contracting officer. The following wording is suggested (but not mandatory) for the written authorization. The authorizing contracting officer may use other language, as appropriate.

“Authorization is granted for [FFRDC Name] to participate in the proposed project. The work proposed for [FFRDC Name] is consistent with or complimentary to the missions of [FFRDC Name], will not adversely impact execution of assigned programs at [FFRDC Name], and will not place [FFRDC Name] in direct competition with the domestic private sector.”

1. **FIELD WORK PROPOSAL** (see Section II.B.2 of the FOA): Mandatory for DOE/NNSA FFRDCs only. No page limit. DOE/NNSA FFRDCs are required to append a Field Work Proposal to this form. The Field Work Proposal must conform to the instructions in DOE O 412.1A, “Work Authorization System” (<https://www.directives.doe.gov/directives-documents/400-series/0412.1-BOrder-a-chg1-AdmChg>). If the Applicant is not a DOE/NNSA FFRDC, check the box marked “Not Applicable” below.

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| **If NOT APPLICABLE, check here [ ]**  |

1. In this form, “principal” means: (1) An officer, director, owner, partner, principal investigator (PI), or other person (as defined in 2 C.F.R. 180.985) within the Project Team with management or supervisory responsibilities related to this application and any resulting transaction; or (2) A consultant or other person, whether or not employed by the Applicant or its principals, or paid with Federal funds, who (a) is in a position to handle Federal funds, (b) is in a position to influence or control the use of those funds, or (c) occupies a technical or professional position capable of substantially influencing the development or outcome of an activity required to perform the transaction, including, without limitation, any Co-PIs. [↑](#footnote-ref-2)
2. In this form, “covered offenses” include: (1) Commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public or private agreement or transaction; (2) Violation of Federal or State antitrust statutes, including those proscribing price fixing between competitors, allocation of customers between competitors, and bid rigging; (3) Commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, receiving stolen property, making false claims, or obstruction of justice; or (4) Commission of any other offense indicating a lack of business integrity or business honesty that seriously and directly affects the Applicant’s present responsibility. [↑](#footnote-ref-3)
3. In this form, “excluded” refers to: Only discretionary actions taken by a suspending or debarring official under Executive Order 12549 and Executive Order 12689 or under the Federal Acquisition Regulation (48 C.F.R. Part 9, Subpart 9.4. [↑](#footnote-ref-4)
4. In this form, “disqualified” refers to: Prohibitions under specific statutes, executive orders (other than Executive Order 12549 and Executive Order 12689), or other authorities. Disqualifications frequently are not subject to the discretion of a Federal agency official, may have a different scope than exclusions, or have special conditions that apply to the disqualification. [↑](#footnote-ref-5)
5. In support of your description, you are required to attach to this form any letter(s) or other communication(s) (e.g., emails) from private investors that you have received explaining why they decided not to fund the proposed R&D project. [↑](#footnote-ref-6)