FORM DOE-XXX	DEPARTMENT OF ENERGY OFFICE OF ELECTRICITY	FOR DOE USE OMB NO.1910-XXXX			
REQUEST FOR SPECIAL PRIORITIES ASSISTANCE		CASE NO			
READ INSTRUCTIONS BELOW FILL OUT USING COMPUTER		RECEIVED			
		ASSIGNED TO			
regulations (10 CFR Part 217 as to any matter within its jur. Defense Production Act of 19 withholding it is contrary to the exemptions if such information	). It is a criminal offense under 18 U.S.C. 1001 to isdiction. All company information furnished rela 050 [50 U.S.C. App.2155(d) which prohibits publi he interest of the national defense. The Departme	ssistance. See sections 217.40-44 of the Energy Priorities and Allocations System make a willfully false statement or representation to any U.S. Government agency ted to this application will be deemed business confidential under Sec. 705(d) of the cation or disclosure of this information unless the President determines that nt of Energy will assert the appropriate Freedom of Information Act (FOIA) zed publication or disclosure of such information by Government personnel is			
OMB Burden Disclosure Statement					
This data is being collected to implement the Department of Energy's Energy Priorities and Allocations System regulations, promulgated pursuant to the Defense Production Act of 1950, as amended (DPA). The data you supply will be used to allow you to request special priorities assistance from DOE to fill a rated order issued pursuant to the DPA and DOE's implementing regulations. DOE will also use the information to conduct audits and for enforcement purposes.					
existing data sources, gatherin burden estimate or any other a Records Management Divisio	ng and maintaining the data needed, and completin aspect of this collection of information, including on, IM-23, Paperwork Reduction Project (1910-XX	e 32 minutes per response, including the time for reviewing instructions, searching and reviewing the collection of information. Send comments regarding this suggestions for reducing this burden, to Office of the Chief Information Officer, <b>XXX</b> ), U.S. Department of Energy, 1000 Independence Ave SW, Washington, DC, erwork Reduction Project (1910- <b>XXXX</b> ), Washington, DC 20503.			
1. APPLICANT INFO	ORMATION				
<ul> <li>Name and complete address of Applicant (Applicant can be any person needing assistance – Government agency, contractor, or supplier. See definition of Applicant in Footnotes section on last page of this form).</li> </ul>		b. If Applicant is not end-user Government agency, give name and complete address of Applicant's customer.			
Applicant Name		Customer name			
Address		Address			
	StateZip	CityStateZip			
Contact Name		Contact Name			
Title		Title			
	Fax	Telephone Fax			
Email address		Contract/purchase order no			

	Dateu			
	Dated	Priority Rating		

2. APPLICANT ITEM(S). If Applicant is not end-user Government agency, describe item(s) to be delivered by Applicant under its customer's contract or purchase order though the use of the item(s) listed in Block 3. If known, identify Government program and end-item for which these items are required. If Applicant is end-user Government agency and Block 3 item(s) are not end-items, identify the end-item for which the Block 3 item(s) are required. See definition of "item" in Footnotes section on last page of this form.

## 3. ITEM(s) (including service) FOR WHICH APPLICANT REQUESTS ASSISTANCE

Quantity	Description	Dollar Value
Pieces, units	Include identifying information such as model	Each quantity listed
	or part number	